



PO BOX 7167 ~ JUPITER FL. 33468

Phone: (872) 222-JPAF ~ www.jpaf.org ~ Email: President@jpaf.org

**SCHOLARSHIP APPLICATION
ALL MIDDLE & HIGH SCHOOL GRADE LEVELS**

Please complete all of the information requested below. Without a completed and signed application, JPAF will be unable to consider or process your request. Mail to the above address.

If you have any questions, please contact us. **DEADLINE IS APRIL 28, 2017**

Requestor Name: _____ School: _____

Home Address: _____

Email: _____ Phone: _____

Funding payable to: _____

(instructor's name, school, camp, etc)

Amount requested (maximum \$300) _____

Date (s) of event _____

Scholarships will only be granted for music, color guard & drama students in the public school system located in Jupiter, Florida. Does not cover personal expenses, school sponsored trips, school fees.

Funds will be made payable to the organization that offers the music activity you will be attending only.

Please provide the following information to the JPAF board for your scholarship consideration along with the application:

- Letter from applicant to the board explaining how the scholarship monies will be used, how it will impact you, and any financial needs.
- JPAF Reference Form emailed from your band director/music instructor to President@jpaf.org
- Two letters of recommendation. One letter of recommendation must be from your band director/ music instructor.
- Copy of program application form or program flyer stating dates and actual cost of the program or documentation of the fees charged for any lessons.

I understand that any and all funds received through JPAF will be used as documented above and that documentation may be requested and provided to JPAF if necessary.

AND

Signature of Applicant

Signature of Parent or Guardian

I certify that the funding request indicated per the documentation or explanation provided herein were received, that documentation may be provided for prepayments.