

Walter and Eileen Jeanes Jachna Scholarship

Student Application

Purpose: To provide financial support to currently enrolled CCRI students who are majoring in Paralegal Studies, Nursing, or Developmental Disabilities Studies certificate program. For Paralegal and Nursing Programs, students must be currently registered for at least 9 credit hours for the semester and have already completed at least 12 credits and two semesters toward his/her degree. For Developmental Disabilities certificate program, students must be currently registered for at least 6 credit hours and have already completed at least 6 credit hours toward a certificate. Students must have maintained a 3.0 GPA or better. Students must demonstrate some financial need. Students must be citizens of the United States.

Instructions:

Please print clearly or type and return completed form to:
Walter and Eileen Jeanes Jachna Scholarship
Chair, Criminal Justice Department
Community College of Rhode Island
400 East Avenue
Warwick, RI 02886

**Applications must be hand delivered by 4:00 pm or postmarked no later than April 1.
Incomplete or late submissions will not be considered.**

Name: _____

Student ID #: _____

Address: _____

City, State, Zip Code: _____

Phone: _____

Cell Home

Email: _____

CCRI Home Business

1. Are you currently enrolled at CCRI in (check one):

Paralegal Studies Nursing Program Developmental Disabilities Certificate Program

2. How many credit hours are you currently enrolled in? _____

3. How many credit hours have you completed? _____

4. What is your current GPA? _____

5. Are you a United States citizen? Yes No

If naturalized, write date. _____

6. Describe your involvement in school and/or community activities. *(Attach additional pages as necessary.)
(If not, please provide reason as for the extenuating circumstances on a separate sheet of paper.)*

7. Describe your financial need. *(Attach additional pages as necessary.)*

8. Please attach a 300-400 word essay describing your career goals and why you are committed to your career.

9. Have you received any other CCRI scholarships, funds or awards? Yes No

a. If yes, please list: _____

I grant my permission to the scholarship review committee to review my academic standing with CCRI's Office of Enrollment Services, to review my financial need with CCRI's Financial Aid Office, and to use my name and/or photo for publicity purposes.

Student Signature

Date