

The Michael Jackson Wrestling Scholarship, Inc.

P.O. Box 307

Versailles, KY 40383

Application

About the Scholarship

The Michael Jackson Wrestling Scholarship, Inc. (MJWS), a 501(C)(3) non-profit organization, was formed in 2003 in memory of Christopher Michael Jackson, after his life was tragically cut short in 2002. Michael was a graduate of Woodford County High School and a 2000 state wrestling champion.

The MJWS selection committee annually awards one scholarship to a senior wrestler that best exemplifies the championship qualities Michael demonstrated during his four years of wrestling at WCHS which include: sportsmanship, strong work ethic, enthusiasm, and leadership. Additionally, the committee considers the qualities of good citizenship and participation in school and community activities. The selection committee reserves the right not to award the scholarship in the event that none of the applicants meet the qualities that Michael demonstrated.

Applicants of the scholarship must be accepted to a college/university for the fall semester after their senior year in high school. The scholarship award amount is determined annually and half of the award is distributed directly to the college/university at the beginning of the fall semester. The other half of the award will be distributed directly to the college/university at the beginning of the spring semester.

Instructions

To be considered for the scholarship, the attached application, an essay, and two letters of recommendation, must be completed and delivered to the current head wrestling coach no later than 4 pm on the second Friday in April.

Application Checklist: See at Bottom of Application

The Michael Jackson Wrestling Scholarship

Instructions

***Return application form, letters of recommendation from a community leader and a teammate and/or friend, essay, and any other pertinent information to the wrestling coach by 4 pm on the second Friday in April. All areas of the application must be 100% completed with the exception of optional information. Incomplete applications will not be considered.**

Name: _____

Address: _____

Phone: _____

Name of Parent(s): _____

Address: _____

Phone: _____

College You Have Chosen To Attend: _____

To Be Completed by Counselor

H.S. Cumulative GPA _____ ACT Score _____ SAT Score _____

WCHS Counselor's Signature: _____

Release of Academic Information: Your signature below gives the school permission to release all academic information to the selection committee for consideration of this scholarship.

Student Signature _____ Date _____

Parent Signature _____ Date _____

School and Community Activities: List up to 6 activities and years involved during high school. This could include clubs, sports, music, church activities, etc.

Activity	Number of years

Awards Other Than Wrestling: Academics, Sport, and Community awards received during high school.

Award	Year Received

Wrestling Statistics and Awards: Include year of award and weight class during high school.

State Winner _____ State Placer _____

Regional Winner _____ Regional Placer _____

Career Wins/Losses _____

Wrestling Awards _____

Add any additional wrestling achievements.

Provide an attachment for any other pertinent information you feel is important in evaluating your application for this scholarship.

Essay Topic: How has wrestling influenced your life?

Instructions for Essay: Write a 1 page, single-spaced (12 point font) essay on the above topic and attach to the back of the application.

Letters of Recommendations: Provide a letter of recommendation from each of the following people:

1. Community Leader: Return in a sealed envelope with application.
2. Teammate and/or Friend: Return in a sealed envelope with application.

Questionnaires: Give questionnaires to a WCHS teacher and the head wrestling coach. The teacher and coaches will return the questionnaire to the WCHS head wrestling coach's mailbox.

***Return application form, letters of recommendation from a community leader and a teammate and/or friend, essay, and any other pertinent information to the WCHS head wrestling coach by 4 pm on the second Friday in April.**

Application Checklist: Applicant must initial each line in the following table, indicating that the application is complete.

Initials	REQUIRED APPLICATION CONTENTS
	Application form, signed and dated by student and parent
	Essay
	WCHS Teacher Questionnaire
	WCHS Coach Questionnaire
	Letter of recommendation from a community leader
	Letter of recommendation from a teammate and/or friend

Received By: _____

Date Received: _____

The Michael Jackson Scholarship Teacher Questionnaire

To Be Completed By The Student:

Name _____

Address: _____

Phone #: _____

TO BE COMPLETED BY A WCHS Teacher:

Length of time you have known applicant: _____

We are seeking information about qualities related to the applicant's strengths in the following categories. Thank you for taking the time to complete this questionnaire.

Check Appropriate Column For Each Item	Most of the Time	Sometimes	Seldom
Academics:			
Follows Rules			
Completes Assignments			
Gives Best Effort			
Citizenship:			
Follow Rules and/or Laws			
Helps Others			
Positive Attitude			
Shows Respect			

Write any additional comments on the back of the questionnaire.

Please return this questionnaire to the WCHS head wrestling coach by 4 pm on the second Friday in April.

Questionnaire Completed By:

Name

Date

The Michael Jackson Scholarship Coach Questionnaire

To Be Completed By The Student:

Name _____

Address: _____

Phone #: _____

TO BE COMPLETED BY the WCHS head wrestling coach:

Length of time you have known applicant: _____

We are seeking information about qualities related to the applicant's strengths in the following categories. Thank you for taking the time to complete this questionnaire.

Check Appropriate Column For Each Item	Most of the Time	Sometimes	Seldom
Shows Respect to Adults			
Shows Respect to Peers			
Good Sportsmanship			
Exceptional Work Ethic			
Championship Qualities			
Leadership			
Team Spirit and Pride			
Positive Attitude			
Follows Rules			
Mentors Other Wrestlers			

Questionnaire Completed By:

Name

Date