

**Northside Independent School District Council of PTAs**  
**Jack C. Jordan Scholarship**  
**c/o Guidance Department**  
**5651 Grissom Road**  
**San Antonio, Texas 78238**

December 12, 2011

Dear Seniors and Parents:

The NISD Council of PTAs awards scholarships each year to outstanding seniors from each NISD high school. The scholarship fund is named after Jack C. Jordan who served this district for 35 years including as Superintendent from 1982 to 1993.

In order to be considered for a Jack C. Jordan Scholarship, a student must file the application according to the procedures outlined in the application packet. Applications are available in the high school counselors' offices beginning in mid-December; completed applications are due in the counselors' offices by Friday, February 3, 2012. Finalists will be interviewed by the Scholarship Committee in April. One recipient and an alternate will be selected from each Northside ISD high school that has a PTA/PTSA unit. Recipients will be introduced at the Council PTA meeting on May 3, 2012.

The criteria for receiving a Jack C. Jordan Scholarship are:

1. Be a graduate of a Northside ISD high school
2. Attend a regionally accredited two/three/four-year college or university (e.g. SACS)
3. Exhibit behavior consistent with the NISD Pillars of Character
4. Need financial assistance
5. Have a scholastic record satisfactory to the Committee
6. Be a member of their local school's PTSA

The monetary value of the scholarship is \$2,400 disbursed over the student's desired degree program not to exceed four years. An annual payment of \$600 is paid in two installments, \$300 each semester. Checks are made payable to and mailed directly to the colleges or universities. Continuance of the scholarship for the second, third, and fourth years of college work is at the discretion of the Scholarship Committee and is contingent upon the recipient being responsible for the following:

1. Taking at least 12 course hours each semester
2. Maintaining at least a 2.0 GPA each semester
3. Maintaining continuous enrollment in the Fall and Spring semesters
4. Submitting copies of grades earned each semester within 14 days of receiving grades

For questions about this scholarship, please contact your school counselor or high school career center.

Signature on File

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Donna Smith, President  
NISD Council of PTAs

Signature on File

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Paula Swope, Chairperson  
Jack C. Jordan Scholarship Committee  
NISD Council of PTAs

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**APPLICATION INSTRUCTIONS**

**TO THE STUDENT:**

Please read and fill out the attached forms carefully and completely. All information will be held in the strictest confidence. The information requested is similar to that requested by the Minnie Stevens Piper Foundation and the Financial Needs Analysis. There are three recommendation forms to be completed by school staff members.

In addition, you need two adults who are not relatives, teachers, or counselors to each submit a letter that reviews your character in regard to truthfulness, conscientiousness, and the ability to accept responsibility, as well as any other information they wish to provide. The adults should include how long they have known you and in what capacity.

Your Personal Narrative, explaining why this committee should select you, needs to include a discussion of plans for the future, hopes, ambitions, and reasons for the choice of a particular college and field of study. If there are unusual circumstances in your family, please explain and discuss. Please do not repeat school achievements that should be listed on page 3 of the Application Form unless a particular activity is a major part of your life. Suggested length of Personal Narrative is 200-400 words. **PLEASE CONCENTRATE ON ACADEMICS AND FUTURE PLANS.** (You may use the same narrative that you filed with the Minnie Stevens Piper Foundation.)

**Complete application packet must be returned to your high school counselor no later than  
Friday, February 3, 2012.**

\*\*\*\*\*

NOTE TO COUNSELORS: Please check that all items listed below are enclosed.

Application Form (incl pg 3 w/signatures) \_\_\_\_\_

PTSA Member Verification \_\_\_\_\_

Financial Information \_\_\_\_\_

Transcript \_\_\_\_\_

Recommendation Forms:

Teacher \_\_\_\_\_

Teacher \_\_\_\_\_

Counselor \_\_\_\_\_

Recommendation Letters: (Other Adults) (1) \_\_\_\_\_ (2) \_\_\_\_\_

Personal Narrative \_\_\_\_\_

NISD Council of PTAs appreciates the Minnie Stevens Piper Foundation for permitting the adaptation of its forms.

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**APPLICATION FORM**

Name \_\_\_\_\_ HS Attending \_\_\_\_\_  
          Last                      First                      Middle

NISD Student ID # \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_  
                                    Number & Street                      City                      State                      Zip Code

Home Phone # \_\_\_\_\_ Alternate Phone # \_\_\_\_\_

**\*\*APPLICANT MUST BE A MEMBER OF THEIR LOCAL SCHOOL'S PTSA.\*\***

Parents are: (circle one)      Married      Divorced      Separated      Widowed      Single

Father or Guardian \_\_\_\_\_ Age \_\_\_\_\_

Home Address \_\_\_\_\_  
                                    Number & Street                      City                      State                      Zip Code

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Name/Address of Father's/Guardian's Employer or Firm \_\_\_\_\_  
\_\_\_\_\_

Title \_\_\_\_\_ Position \_\_\_\_\_ Business Phone # \_\_\_\_\_

Mother or Guardian \_\_\_\_\_ Age \_\_\_\_\_

Home Address \_\_\_\_\_  
(if different from Father's)      Number & Street                      City                      State                      Zip Code

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Name/Address of Mother's/Guardian's Employer or Firm \_\_\_\_\_  
\_\_\_\_\_

Title \_\_\_\_\_ Position \_\_\_\_\_ Business Phone # \_\_\_\_\_

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College or university you wish to attend:

1st

Choice \_\_\_\_\_  
Name City State

Have you been accepted? \_\_\_ Yes \_\_\_ No

2nd

Choice \_\_\_\_\_  
Name City State

Have you been accepted? \_\_\_ Yes \_\_\_ No

3rd

Choice \_\_\_\_\_  
Name City State

Have you been accepted? \_\_\_ Yes \_\_\_ No

Intended major \_\_\_\_\_ Intended career \_\_\_\_\_

Do you have educational plans beyond four years of college? \_\_\_\_\_

If so, please explain. \_\_\_\_\_

**EMPLOYMENT RECORD: (Present or Previous)**

Employer \_\_\_\_\_

Dates: From \_\_\_\_\_ to \_\_\_\_\_

Employer \_\_\_\_\_

Dates: From \_\_\_\_\_ to \_\_\_\_\_

Employer \_\_\_\_\_

Dates: From \_\_\_\_\_ to \_\_\_\_\_

Employer \_\_\_\_\_

Dates: From \_\_\_\_\_ to \_\_\_\_\_

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**SCHOOL ACHIEVEMENTS**

On a separate page, please list your school achievements by grade (9<sup>th</sup> gr, 10<sup>th</sup> gr, 11<sup>th</sup> gr, 12<sup>th</sup> gr). Include clubs, athletics, awards, and any offices held in each.

**ACTIVITIES AND AWARDS OUTSIDE OF SCHOOL**

On a separate page, please list your activities and awards outside of school by year. Include church, scouts, community service, and any offices held in each.

**PTSA MEMBERSHIP**

**Applicant** must be a member of their local school's PTSA. Please include a copy of your current membership card or a letter signed by a current PTSA Board member verifying that you are a current member.

\_\_\_\_\_  
Student Signature Required

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature Required

\_\_\_\_\_  
Date

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**FINANCIAL INFORMATION**

Applicant's parent/guardian should provide assistance in completing the Financial Information. Your answers should be taken from the **2011-2012** Free Application for Federal Student Aid (FAFSA).

Please provide the following information for the individual(s) who will be contributing to the financial assistance of your college education:

1. 2011 income earned:

Father: \_\_\_\_\_ Mother: \_\_\_\_\_  
 Stepfather: \_\_\_\_\_ Stepmother: \_\_\_\_\_  
 Student: \_\_\_\_\_ Other, if applicable: \_\_\_\_\_

2. 2011 other sources of finances and amounts (include Texas Tomorrow Fund, retirement benefits, Social Security, etc.):

Amount	Recipient	Source
\$ _____	_____	_____
\$ _____	_____	_____
\$ _____	_____	_____
\$ _____	_____	_____

3. Number of eligible dependents\* in family \_\_\_\_\_ Ages \_\_\_\_\_  
 (including applicant)

Number of eligible dependents\* living in the household attending college:

Dependent Relationship (i.e. mother, brother, etc.)	Attendance Status (Full-Time (FT)/Part-Time (PT))	Receiving Financial Aid (Y/N)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\*as defined by the IRS at [www.irs.gov](http://www.irs.gov)

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4. Expected 2012 income and benefits:

Father: \_\_\_\_\_ Mother: \_\_\_\_\_  
 Stepfather: \_\_\_\_\_ Stepmother: \_\_\_\_\_  
 Student: \_\_\_\_\_ Other, if applicable: \_\_\_\_\_

5. Will the applicant be receiving Veteran Educational Benefits for college? \_\_\_\_\_

6. Amount saved to date in applicant's bank and/or trust account(s), if applicable. \$\_\_\_\_\_

7. Unusual Expenses: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

8. What other scholarships or financial aid have you applied for? Amt Offered? Amt Accepted?  
 (Add additional page(s) if necessary.)

What other scholarships or financial aid have you applied for? (Add additional page(s) if necessary.)	Amt Offered?	Amt Accepted?
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**CERTIFICATION:** All of the information on this form is true and complete to the best of my knowledge. If asked by the Scholarship Committee, I agree to give proof of the information that I have given on this form. I realize that this proof may include a copy of my 2011 U.S. Income Tax Return. I also realize that if I do not give proof when asked, the student will not receive aid.

\_\_\_\_\_  
 Student Signature Required Date

\_\_\_\_\_  
 Parent/Guardian Signature Required Date

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**TEACHER'S CONFIDENTIAL RECOMMENDATIONS**

\_\_\_\_\_  
 Student's Name (please print)

\_\_\_\_\_  
 Campus

**TO THE TEACHERS WHO GIVE STUDENT RECOMMENDATIONS:** Any endorsement of a student should show qualifications pertinent to the preferred area of study. Any special qualities that are outstanding in the student, such as courtesy, kindness, the ability to interact with people, etc., should also be noted. Cite your personal experiences with the student.

Please rate the personal characteristics of this student by a check in the appropriate columns, 3 being Superior.

<b>TRUSTWORTHINESS</b>	1	2	3
<b>RESPECT</b> (DILIGENT, CONSCIENTIOUS)	1	2	3
<b>RESPONSIBILITY</b> (DEPENDABLE)	1	2	3
<b>FAIRNESS</b> (EQUITABLE, REASONABLE)	1	2	3
<b>CARING</b> (CONSIDERATE OF OTHERS)	1	2	3
<b>CITIZENSHIP</b> (COOPERATIVE, TEAM PLAYER, AND PUBLIC SPIRITED)	1	2	3

Any comments in addition to the required checks will help in the assessment of the applicant. Attach an additional sheet if necessary.

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\_\_\_\_\_  
 Teacher's Name (please print)

\_\_\_\_\_  
 Subject Taught

\_\_\_\_\_  
 Teacher's Signature

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**TEACHER'S CONFIDENTIAL RECOMMENDATIONS**

\_\_\_\_\_  
 Student's Name (please print)

\_\_\_\_\_  
 Campus

**TO THE TEACHERS WHO GIVE STUDENT RECOMMENDATIONS:** Any endorsement of a student should show qualifications pertinent to the preferred area of study. Any special qualities that are outstanding in the student, such as courtesy, kindness, the ability to interact with people, etc., should also be noted. Cite your personal experiences with the student.

Please rate the personal characteristics of this student by a check in the appropriate columns, 3 being Superior.

<b>TRUSTWORTHINESS</b>	1	2	3
<b>RESPECT</b> (DILIGENT, CONSCIENTIOUS)	1	2	3
<b>RESPONSIBILITY</b> (DEPENDABLE)	1	2	3
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<b>CARING</b> (CONSIDERATE OF OTHERS)	1	2	3
<b>CITIZENSHIP</b> (COOPERATIVE, TEAM PLAYER, AND PUBLIC SPIRITED)	1	2	3

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\_\_\_\_\_  
 Teacher's Name (please print)

\_\_\_\_\_  
 Subject Taught

\_\_\_\_\_  
 Teacher's Signature

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**COUNSELOR’S CONFIDENTIAL RECOMMENDATIONS**

\_\_\_\_\_  
 Student’s Name (please print)

\_\_\_\_\_  
 Campus

**TO THE COUNSELORS WHO GIVE STUDENT RECOMMENDATIONS:** Any endorsement of a student should show qualifications pertinent to the preferred area of study. Any special qualities that are outstanding in the student, such as courtesy, kindness, the ability to interact with people, etc., should also be noted. Cite your personal experiences with the student.

Please rate the personal characteristics of this student by a check in the appropriate columns, 3 being Superior.

<b>TRUSTWORTHINESS</b>	1	2	3
<b>RESPECT</b> (DILIGENT, CONSCIENTIOUS)	1	2	3
<b>RESPONSIBILITY</b> (DEPENDABLE)	1	2	3
<b>FAIRNESS</b> (EQUITABLE, REASONABLE)	1	2	3
<b>CARING</b> (CONSIDERATE OF OTHERS)	1	2	3
<b>CITIZENSHIP</b> (COOPERATIVE, TEAM PLAYER, AND PUBLIC SPIRITED)	1	2	3

Any comments in addition to the required checks will help in the assessment of the applicant. Attach an additional sheet if necessary.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
 Counselor’s Name (please print)

\_\_\_\_\_  
 How long have you known student?

\_\_\_\_\_  
 Counselor’s Signature

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**ADULT RECOMMENDATIONS**

Please have two adults who are not relatives, teachers, or counselors each submit a letter that reviews your character in regard to truthfulness, conscientiousness, and the ability to accept responsibility, as well as any other information they wish to provide. The adults should include how long they have known you and in what capacity.

**PERSONAL NARRATIVE**

Please submit a personally written letter stating why you believe the Scholarship Committee should select you for this scholarship. Your letter should include a discussion of plans for the future, hopes, ambitions, and reasons for the choice of a particular college and field of study. If there are unusual circumstances in your family, please explain and discuss. Do not repeat your listing of school achievements unless a particular activity is a major part of your life. Please concentrate on academics and future plans. Suggested length is 200-400 words.