



JUNIOR LEAGUE OF HAMPTON ROADS VOLUNTEER SCHOLARSHIP APPLICATION 2024

The Junior League of Hampton Roads was founded in 1956 and is an organization of women whose mission is to advance women's leadership for meaningful community impact through volunteer action, collaboration, and training. Its purpose is exclusively educational and charitable. The Volunteer Scholarship was established in 2018 to support the volunteer potential of our youth by awarding one or more scholarships ranging from \$500 - \$3000+ to high school young women who demonstrate outstanding volunteer performance in the community. We have awarded eight scholarships to graduating women seniors in the past four years.

Candidates for the Volunteer Scholarship **must** meet the following requirements:

1. Must be a graduating, female senior, who has earned a cumulative grade point average of at least 3.0
2. Must be enrolled as a student, public or private, in Hampton, Newport News, York County, Williamsburg-James City County, Poquoson, Smithfield, Isle of Wight, or Gloucester.
3. Must enroll as at least a half-time student in an eligible educational institution, defined as a school offering higher education beyond high school. It is any college, university, trade school, or other post-secondary educational institution eligible to participate in a student aid program run by the U.S. Department of Education. This includes most accredited public, nonprofit and privately-owned-for-profit postsecondary institutions.
4. Must be involved in a volunteer capacity in the community. Volunteer work must be separate from any school requirement.

Application Procedures:

1. Complete the application, including the Scholarship and Photo Release Consent, Volunteer Experience Log, Application Questions, Volunteer Supervisor Recommendation Form, and Teacher or Adult Mentor Recommendation Form. The application must be completed in its entirety – all questions must be answered.
2. Submit your application to the Junior League of Hampton Roads.

Applications must be received no later than **Tuesday, April 30th at 11:59 pm** to:
vpcommunity@jlhamptonroads.org

OR

Mail to JLHR Headquarters:
ATTN: Scholarship Committee
729 Thimble Shoals Boulevard, Suite 4-D
Newport News, VA 23606

By submitting this application, applicants agree to authorize schools and volunteer organizations to submit information to the Junior League of Hampton Roads.

Scholarship winner must provide verification of enrollment. Scholarship award check will be made out to the institution/recipient by the JLHR.



Scholarship recipients will be notified by May 15th and a celebration will occur on May 22nd in the evening.



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Applicant Name: _____
Last First Middle

Applicant Address: _____
Street City State Zip

Applicant Telephone: _____
Email Address: _____

Current High School: _____

Address: _____
Street City State Zip

Telephone: _____

Cumulative Grade Point Average (specify weighted or unweighted): _____

School Counselor Verification Signature: _____

Name of Intended Institution (if undecided, please provide a list of schools you are considering):

Name of Parent/Guardian: _____
Relationship

Address: _____
Street City State Zip

Parent/Guardian Telephone: _____
Parent/Guardian Email: _____

I affirm that the information provided in this application is true and complete to the best of my knowledge. I consent to the verification of information contained in my application.



Signature of Applicant: _____
Date: _____

* Applicant *should not* include the following: transcripts, SAT scores, or personal résumé. *



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VOLUNTEER EXPERIENCE LOG

Please complete the chart below with a summary of your volunteer experience. All volunteer work eligible for consideration must be completed within the past four years (i.e., 9th grade through 12th grade). Please also note if your volunteer work was done for credit.

| Name of Activity | Location | Contact Name & Phone * | Dates Involved | # Hours Per Week | Total Volunteer Hours | Credit Received (yes/no) |
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* I, _____, hereby authorize those persons indicated to release information concerning _____ my _____ volunteer _____ activities.

Name of Student Applicant



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APPLICATION QUESTIONS

Please answer the following questions:

1. Please describe your volunteer experience in detail (as referenced on the Volunteer Experience Log). The Junior League of Hampton Roads historically focuses its efforts on women, children, and training. This year the identified Impact Areas for the community are family services and education. If you have experience in these areas, please be sure to highlight below.



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APPLICATION QUESTIONS

2. What are your educational goals? What type of program/studies do you intend to pursue or are pursuing? What do you hope to do upon completion of your studies? What are your career objectives?

3. From a financial standpoint, what impact would this scholarship have on your education?



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VOLUNTEER SUPERVISOR RECOMMENDATION FORM

The Junior League of Hampton Roads wishes to recognize young people who have demonstrated an exceptional interest in voluntarism and academic success. As an adult involved directly with _____ please complete this form with information regarding this student's
Student Applicant
volunteer activities. Please include a description of the activity, related responsibilities, time involved, and personal qualities of the student which contributed to her successful community participation.

Name: _____ Title: _____

Agency/Organization: _____

Address: _____
Street City State Zip

Telephone Number: _____

DESCRIPTION OF APPLICANT STUDENT'S VOLUNTEER WORK:

I hereby authorize the person indicated above to release additional information concerning my volunteer activities.

Signature of Applicant: _____

Date: _____



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TEACHER OR ADULT MENTOR RECOMENDATION FORM

Suitable references include teachers, clergy or church staff, employers, or coaches.

The Junior League of Hampton Roads wishes to recognize young people who have demonstrated an exceptional interest in voluntarism and academic success.

Please share how you know the applicant and why they should receive a scholarship for their work in the community.

Signature of Recommender _____ Date _____



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SCHOLARSHIP AND PHOTO RELEASE CONSENT FORM

*To be considered for the scholarship, this consent form must be submitted with the application and signed by **both** the student applicant and a parent/guardian.*

The Junior League of Hampton Roads, Inc. will invite the scholarship recipient to our Annual May Dinner on May 22nd to be recognized and photographed with members of the League. This photograph may be used on our website, social media websites, and/or placed on display within our Headquarters.

I, _____, hereby acknowledge that:
Student Applicant

1. The information contained within this application is both true and correct.
2. I give my permission for the information within my scholarship application to be shared with individuals associated with and the members of The Junior League of Hampton Roads, Inc.
3. I release to The Junior League of Hampton Roads, Inc. the right to use my name, photograph, and other information contained within this application on the Junior League of Hampton Roads, Inc. website (www.jlhr.org), social media websites, publications, reports, and/or press releases.

Signature of Student Applicant

Signature of Parent/Guardian

Printed Name of Student Applicant

Printed Name of Parent/Guardian

Date

Date