

GOLD COAST SOCIETY

Jeanette M. Russell Scholarship* Competition & Application Form

For
College Students

Application Deadline: March 12, 2010

All applications must be **postmarked or received on or before 5 p.m. on March 12, 2010**
by the Gold Coast Jazz Society.

No applications will be accepted after the deadline date.

The Gold Coast Jazz Society does not accept applications by fax.

All applicants will receive written notification of their status. **Finalists will be required to perform in the Jeanette M. Russell Jazz Scholarship Competition on Saturday, April 10, 2010 and will be notified of their performance time.** A live backline of piano, bass and drums will be provided for accompaniment purposes.

Send applications to:

Gold Coast Jazz Society
1350 East Sunrise Boulevard
Fort Lauderdale, FL 33304
(954) 524-0805

*Scholarships are awarded in memory of Lady Jazz and St. Louie Ray.

GCJS's Jeanette M. Russell Scholarship

Eligibility

- Full-time enrollment at a college or university studying jazz instrumental or jazz vocal performance
- Expected Family Contribution (EFC) of not greater than \$5,000. (Note: it will be necessary for you to complete a 2010-2011 Free Application For Federal Student Aid (FAFSA) and receive a Student Aid Report (SAR) containing your Expected Family Contribution (EFC) prior to filing this application. You can complete a FAFSA on line at www.fafsaed.gov.)
- Florida residency
- Grade point average (GPA) of 2.5 (based on 4 point scale) or above during previous academic year
- Recommendation from college/university music department official

Competition Requirements

All finalists must perform a 5-6 minute audition demonstrating ability. A live backline of piano, bass and drums will be provided.

Award Amount

An annual scholarship award for tuition that may be awarded an applicant will be determined by the Scholarship Committee based on competition results and monetary availability each year. One-half (1/2) of such award will be paid, each semester, directly to the college or university on behalf of the student. Summer tuition is not eligible for payment.

Notes:

-In order for the second half of an award amount to be paid the second semester, the student must have maintained a GPA of 2.5 or above for the previous semester (evidenced by grade transcript) and continue full-time enrollment studying jazz instrumental or jazz vocal performance at a college or university.

-The total financial assistance awarded a student from all sources including scholarships and grants (but excluding loans and work-study programs) cannot exceed the total cost of attendance for the award period less the Expected Family Contribution (EFC)¹. In the event a student's scholarship award causes this limit to be exceeded, the amount of the GCJS Jeanette M. Russell Scholarship awarded to the student will be adjusted to eliminate the over award.

-Students must submit a copy of the letter² indicating college admission to the school of their choice. This letter and the student's class schedule must be submitted to the GCJS prior to any payments being made to a college or university on behalf of the student.

- An applicant or scholarship recipient may re-apply each year for a new scholarship.

¹ The "Expected Family Contribution" (EFC) is the number that's used to determine a student's eligibility for federal student financial aid. This number results from the financial information provided in a FAFSA application. A student's EFC is reported to the student on a Student Aid Report (SAR).

² An "acceptance letter" from a school states admission. You may also provide the type and amount of financial aid the school is willing to provide if you accept admission and register to take classes at that school.

The Gold Coast Jazz Society's Jeanette M. Russell Scholarship Fund

No Staples Please

SCHOLARSHIP APPLICATION

Type or Print all information

DO NOT CUT AND PASTE OR TAPE INFORMATION

APPLICANT DATA

NAME: _____
Last First M.I.

COLLEGE ADDRESS: _____
Street City State Zip

TELEPHONE: () _____ APPLICANT'S AGE: _____
Area Code

If 18 or older, please provide your permanent address.

NAME: _____
Last First Names

ADDRESS: _____
Street City Zip

TELEPHONE: () _____ EMAIL ADDRESS: _____

Instrument _____ or vocal (voice part) _____ How long have you been playing? _____

List performing groups in which you have participated _____ Dates _____

Music awards received _____ Dates _____

PARENT(S)/GUARDIAN DATA

Please provide the name, address and phone number of the parent(s) or guardian with whom you reside.

NAME: _____
Last First Names

ADDRESS: _____
Street City Zip

TELEPHONE: () _____ RELATIONSHIP TO STUDENT: _____
Area Code i.e., Mother & Father, One parent only, Aunt, Grandparent, etc.

COLLEGE DATA

Name of college/university currently attending _____

College Address _____

City _____ State _____ Zip _____ Phone () _____

4 yr. College/University 2 yr. Junior or Community College

College Major: _____ College Minor: _____

GPA (Cumulative) _____ GPA (Major) _____ Hours earned to date _____

Anticipated date of graduation: (Include month and year): _____

ACTIVITIES, AWARDS AND HONORS

SCHOOL-RELATED SCHOLARSHIP, AWARDS, HONORS

List awarded scholarships, awards, honors, etc. **expected** for 2010 - 2011. Include year anticipated.

<u>Scholarship/Award/Honor</u>	<u>Year Received</u>

SCHOOL AND/OR COMMUNITY ORGANIZATIONS AND ACTIVITIES

List your volunteer activities for the last two years. (Musical groups, Church, Clubs, Civic, etc.)

<u>Organization</u>	<u>Member/Officer</u>	<u>Year</u>	<u>Activities</u>

TRANSCRIPT DATA

Applicant **must** include an official college transcript, which **includes the last completed semester of enrollment** and have the following section **completed and signed** by a school official.

TO BE COMPLETED BY A SCHOOL OFFICIAL

Applicant's cumulative **Grade Point Average**: _____

I certify this data is an **official transcript**.

School Official's Name – Please print Title () Phone #

School Official's Signature Date

FINANCIAL INFORMATION

NAME OF APPLICANT'S PARENT OR GUARDIAN:

Last

First Names

HEAD OF HOUSEHOLD: YES _____ NO _____

NUMBER OF PERSONS IN HOUSEHOLD: NO. _____

NUMBER OF PERSONS IN HOUSEHOLD AGED 18 OR OLDER: NO. _____

NUMBER OF PERSONS IN HOUSEHOLD UNDER AGE 18: NO. _____

2009 ANNUAL ADJUSTED GROSS INCOME: \$_____ (Line 34 of most recent form 1040 or Line 4 of most recent Form 1040EZ). **Please attach copy of 1st 2 pages of 2009 1040 (if you do not file a 1040 or if your 2009 1040 is unavailable, attach copies of your 2009 W-2s and 1099s).**

PLEASE EXPLAIN ANY EXTENUATING FINANCIAL CIRCUMSTANCES (and attach any documentation you believe we should consider):

Have you received a Student Aid Report (SAR)? _____. If "yes", please attach copy. (Note: This application cannot be processed without a SAR containing a EFC). If not, it will be necessary for you to complete a 2010-2011 Free Application For Federal Student Aid (FAFSA) and receive a Student Aid Report (SAR) containing your Expected Family Contribution (EFC). You can complete a FAFSA on line a www.fafsaed.gov.)

Expected Family Contribution (EPC) (contained on upper right portion of SAR): _____

Have you received an award letter from the college or university you plan to attend? _____. If "yes", please attach copy. If "no", a copy of the college admission letter and class schedule will be required to be supplied to the GCJS prior to the payment of any scholarship award being made to a college or university on a student's behalf.

PLEASE COMPLETE THE INFORMATION BELOW

Estimate Yearly Coast of Attending School (These figures are provided by school)	\$
Tuition/Fees	
Room or Rent (including utilities)	
Board or Food	
Books and Supplies	
Transportation	
Other: (Please list)	
TOTAL COSTS	\$

List any scholarships or sources of financial assistance that you are currently receiving and/or anticipate receiving for 2010-11 (including grants and aid through the college/university and/or any other federal, state or local government agency).

<u>Describe</u>	<u>Amount</u>	<u>Currently Receiving</u>	<u>Anticipate For 2010-11</u>

CERTIFICATION AND SIGNATURE

I hereby certify and swear that all of the information on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to give proof of the information that I have given on this form. Falsification of information may result in termination of any scholarship granted and repayment of any award paid on behalf of the applicant. It is understood that this application becomes the property of the Gold Coast Jazz Society.

Applicant's Signature _____ Date _____

Parent or Guardian's Signature _____ Date _____

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me on _____, 2010 by _____.

Notary Public--State of Florida

Personally Known _____
Produced Identification _____
Type of Identification _____

Print Notary Name : _____
My Commission Number is: _____
My Commission Expires: _____

Disclaimer

It is hereby understood and acknowledged that Gold Coast Jazz Society (GCJS) and its officers, directors, agents, servants and employees are not liable or otherwise responsible for direct or consequential damages claimed, or alleged by any scholarship applicant or his or her heirs, assignees, agents, parents or guardians as a result of, or arising from the applicants participation in the competition or any associated function or performance; or, as a result of GCJS' administration, judging and granting of awards as part of this program. All decisions by the GCJS are final and are not subject to appeal, question or review of any type and said decision shall be based solely on the information submitted by the applicant and the subjective evaluation of the applicant's competitive performances.

Applicant's Signature _____ Date _____

Parent or Guardian's Signature _____ Date _____

APPLICATION CHECKLIST

This application is complete and valid *only* when you have returned the following:

1. This **completed** application with proper signatures. (Signatures are required in at least three places.)
2. Your official college transcript which *includes last semester grades*.
3. Your income information *and* your parent/legal guardian's income information as described in application (including copy of 1st 2 pages of your parents' 2009 1040 (if they do not file a 1040 or if their 2009 1040 is unavailable, copies of their 2009 W-2s and 1099s).
4. The Recommendation Form completed by a college/university department music official.
5. A copy of your Student Aid Report (SAR) which contains an Expected Family Contribution (EFC).

YOUR APPLICATION WILL NOT BE CONSIDERED IF THERE ARE ANY BLANKS OR MISSING INFORMATION.

Your **completed** application *must be postmarked by or delivered to* the office of the **Gold Coast Jazz Society** by **5:00 p.m. on Friday, March 12, 2010**. Applications received after the deadline *will not be accepted*.

You *may not fax any* portion of your application.

Mail or hand deliver application to:
Gold Coast Jazz Society
1350 East Sunrise Boulevard
Fort Lauderdale, FL 33304
(954) 524-0805

If you have any questions, please contact the Gold Coast Jazz Society at 954-524-0805.

No Staples Please

Gold Coast Jazz Society

RECOMMENDATION FORM

The student named below is applying for a music scholarship administered by the Gold Coast Jazz Society. Your recommendation is needed as part of the application process. **This form is to be filled out by a college/university music department official.** Please complete this form and immediately return it to the applicant in a sealed envelope with your signature across the flap, so he or she may submit it as part of a total package. **The application deadline is Friday, March 12, 2010 at 5:00 p.m.. This form may be duplicated for additional recommendations.**

To be completed by applicant:

Applicant's name: _____
Home Address: _____
School you plan to attend next fall: _____
Course of study you plan to pursue: _____

To be completed by reference:

Please rate the applicant in the following categories on a scale of 1 to 5. (5 the highest ranking/1 the lowest)

	5	4	3	2	1	Unknown
Character	_____	_____	_____	_____	_____	_____
Cooperation	_____	_____	_____	_____	_____	_____
Initiative	_____	_____	_____	_____	_____	_____
Intellectual Ability	_____	_____	_____	_____	_____	_____
Responsibility	_____	_____	_____	_____	_____	_____
Practice habits	_____	_____	_____	_____	_____	_____

On a separate sheet of paper, please write a brief appraisal of the applicant's qualification and motivation to pursue the course of study listed above. Please put student's first and last name on the top right hand corner of the paper. Use only one side of the sheet of paper. Do not write on the back of this form. Do not staple forms together. Thank you.

Name of Reference – Please print Title () Daytime Phone #

Signature of Reference Date

Address City State Zip

RETURN TO APPLICANT IN A SEALED ENVELOPE WITH YOUR SIGNATURE ACROSS THE FLAP.