

James Owens Foundation Scholarship Application Form

Application must be submitted by
April 30, 2026 by 5:00 pm cst
Submit to: jofoundation43@gmail.com

Applicant Information

Full Name:

Date of birth:

Phone (H)

(C)

Email address:

Current address:

City:

State:

ZIP Code:

Parent/Guardian:

Scholarship Requirements

Intended Purpose:

Amount Needed:

Date Needed: (mm/dd/yyyy):

Current School/Job:
(Acceptance Letter Required)

Brief essay explaining what "Quiet Courage" means to you

Current GPA:

Future Goals:

Involvement

Please list all Community, School or Church Involvement

| Name of Activity | Office(s) or Position Held | Year(s) of Participation |
|------------------|----------------------------|--------------------------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |

Awards/ Special Honors (attach an additional sheet if needed)

List major awards and honors that you (person in need) received in your (their) lifetime

| Awards/ Honors | Year(s) Received |
|----------------|------------------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |

Signature of Applicant

I hereby certify that all information submitted on this application is true and accurate to the best of my knowledge.

| | |
|-------------------------|-------|
| Signature of applicant: | Date: |
|-------------------------|-------|