

# Driver Bob Scholarship

**\$1,000**

*In memory of Robert Thompson  
donated by his family*

“Driver Bob”, aka Robert Thompson was an avid sports fan and loved to see student athletes in every sport give all with their heart, mind, body, and soul. He always encouraged great sportsmanship whether they won or lost. After retiring from the State with over 20 years of service, Bob began another important career; that of the favored bus driver for Jacksonville ISD. For over 23 years, he drove JISD students to school and back, and spent countless hours driving for extra-curricular activities. He was particularly fond of transporting athletes, and did so with a smile on his face, words of encouragement to all, and obvious joy in his heart.

His family wishes to remember Bob with an athletic scholarship to a deserving graduating JHS senior athlete.

The qualifications for the scholarship are: Must be in an athletic program at JHS, recommended by a coach or teacher, graduate of JISD, full time fall enrollment (12 hours) in a college or university; \$500 to be paid first semester, additional \$500 second semester with 3.0 GPA.

**Students Name:** \_\_\_\_\_

**Male** \_\_\_\_\_ **Female** \_\_\_\_\_

**Address:**

\_\_\_\_\_

*City*

*State*

*Zip*

**E-mail address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**College Choices:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

This application must be returned by **Friday, April 6, 2018**

# OBJECTIVE CRITERIA LIST

## Driver Bob Scholarship

*Parts I and II of this form are to be completed by the applicant's principal or counselor.  
Parts III and IV are to be completed by the applicant.*

I. College entrance examination score (ACT or SAT)

Note: Please circle the type of examination taken.

ACT composite score or \_\_\_\_\_  
SAT combined score \_\_\_\_\_

II. Student's cumulative high school grade  
point average (GPA) excluding spring  
semester senior year.

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Class Rank \_\_\_\_\_

III. Athletic Involvement

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Honors and Awards/Leadership Activities: (Student Council, National Honor Society, etc.;  
show years of involvement and any office held.)

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Community or Other Activities: (volunteer activities, church groups, etc.)

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**Objective Criteria List**

IV. Work activities – Are you now employed? Yes \_\_\_\_\_ No \_\_\_\_  
*If yes, what type of work of how many hours per week?*

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Describe your other work activities (such as family help, helping at home, family business):

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**Please Include with Scholarship Application:**

- **One (1) sealed Coach Recommendation Letter**

**Important:** If you qualify for this scholarship with your signature below you acknowledge and agree that applicants must re-qualify every year by submitting a letter of status, good standing, and passing grade point average.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent or Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
*(required)*

**DEADLINE: April 6, 2018**

**Submit this information to either:**

Jacksonville Education Foundation  
P O Box 631  
Jacksonville, TX 75766

*or*

Ms. Sharon Loftin  
Senior Counselor  
Jacksonville High School

