

JEWISH FAMILY SERVICE ASSOCIATION OF CLEVELAND

**FAMILY NAMED SCHOLARSHIP
GRADE VERIFICATION FORM**



INSTRUCTIONS: All questions/fields must be filled out legibly.

Today's Date _____

First Name _____ Middle _____ Last Name _____

Birth Date _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____ Home Email _____

School Email _____

School Name _____

City _____ State _____

Major _____ Graduation Month/Year _____

Status (Check one for NEXT semester) Freshman Sophomore Junior Senior Graduate/Medical

GPA _____ Please attach a copy of your grades from the most recently completed semester.

Are you currently enrolled in school full time? Yes No

Please write a short paragraph summarizing your college experience thus far:

I understand that this is a GRADE VERIFICATION FORM and NOT an application renewal. I understand that to apply for scholarships, grants/loans for the 2025/2026 academic year, I must fill out an application online by April 1, 2025.

JFSA **empowers** youth and **strengthens** the role teens and young adults play in our **community**.

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