

We lost our daughter Julianna Ward-Brown in February 2018. Julianna was a Junior at Howell High School and was a breath of fresh air with a huge smile that was always willing to help others. You could find Julianna helping her teammates with homework, spending time with fellow classmates who may be struggling, laughing and giggling in the cafeteria or goofing around on the tennis courts and the ice. For all that had the opportunity to know her, had the opportunity to know a super sweet and fun girl. Yes, her life was way too short, but now her life has provided us with a new vision and strength to live as she did - to want to help others and help strengthen the community we live in. In following in her footsteps, we have created the charity, **Julianna's Wishes**, to help children and families in need and to support local and school organizations and sports teams.



*Julianna's
Wishes*

Scholarships to be awarded

Three (3) to graduating 2022 seniors

2023 Howell High School Seniors

If you are interested in applying for **Julianna's Wishes** Scholarships, please complete the attached application and return to the Howell High School Counseling Office Secretary or email to juliannaswishes93@gmail.com by Monday, April 3rd, 2023.

STUDENT INFORMATION

Student Name (full legal name): _____

Home Address: _____ City: _____ Zip: _____

Student Phone Number: _____

Student School Email: _____

Age: _____

PARENT/GUARDIAN INFORMATION

PARENT/GUARDIAN Name: _____

Home Address: _____ City: _____ Zip: _____

Parent/Guardian Cell/Home Phone Number: _____

Parent/Guardian Email Address: _____

Tell us why you would like to be awarded this scholarship. _____

Put a checkmark next to your academic plans for the Fall.

- College / University
- Vocational / Trade School
- Military
- Undecided

List the name, city and state of the college, university, vocational / trade school or military branch you will be attending in the Fall if decided.

FINANCIAL INFORMATION

Describe your financial need. _____

Extra-Curricular Activities/Community Service/Academic Achievements/Athletic Interests/Hobbies/Difficult Life Experiences

Tell us about yourself: (feel free to write on the back or add sheets if you need to)

Have you ever tried out for anything but didn't make it? _____YES _____NO

If yes, please list and at what grade level: _____

TRANSCRIPT INFORMATION

List your Cumulative GPA. _____
(You do **NOT** need to have a certain GPA to qualify for this scholarship)

STUDENT SIGNATURE

By completing this application,

I understand that all information I have provided is complete and accurate to the best of my knowledge.

I understand that any inaccurate information will disqualify me for scholarship consideration.

I understand all information will be kept confidential.

I understand that my attendance to the Local Scholarship Night is mandatory if awarded a scholarship. If I cannot attend the Local Scholarship Night, I will notify the Counseling Office and have a family member stand in my place to accept my scholarship.

Student Signature: _____ Date: _____

PARENT/GUARDIAN SIGNATURE

My child has completed this application.

I understand that all information he/she has provided is complete and accurate to the best of my knowledge.

I understand that any inaccurate information will disqualify my son/daughter for scholarship consideration.

I understand all information will be kept confidential.

I understand that my son/daughter's attendance to the Local Scholarship Night is mandatory if he/she is awarded a scholarship. If he/she cannot attend the Local Scholarship Night, they will notify the Counseling Office and will have a family member stand in their place to accept their scholarship.

Parent/Guardian(s) Signature: _____ Date: _____