



Jim Jones Memorial Scholarship
“A Hero’s Legacy”



On March 19, 2010 Richmond Lenox EMS lost a colleague and friend, a family lost a father, husband and grandfather and our community lost a hero.

In his memory, the family of Jim Jones established a scholarship to benefit those like Jim, who are eager to serve their community. This scholarship award pays \$2,000.00 of the tuition for one year, to attend the EMT program at Macomb Community College which begins in August of each year.

Applicants must be a High School Senior who demonstrates financial need (see question 1-3 on the application). Further preference will be given to students who live within those communities serviced by Richmond Lenox EMS. The scholarship is non-renewable.

Name: _____
 Address: _____
 Phone #: _____ E-Mail: _____
 Date of Birth: _____ (Applicants must be at least 17 years old)

1. In the past two years has your family experienced a reduction in household income?
 ___ Yes ___ No

2. Are either of your parents currently collecting unemployment benefits from the State of Michigan? ___ Yes ___ No

3. Do you receive lunch at school which is free or at a reduced amount?
 ___ Yes ___ No

4. Have you ever been convicted of a misdemeanor or felony other than a speeding ticket? Yes No

If Yes, please explain: _____

5. Are you currently a U.S. citizen? Yes No

If No, please explain your status: _____

6. Have either of your parents served (or continue to serve) in any branch of the U.S. military?

Yes No Still serving

If Yes, were they honorably discharged? Yes No

7. Will you have a high school diploma at the end of the current school year?

Yes No

8. Do you have any medical conditions which may keep you from completing an EMT program? Yes No Not certain

9. Please provide 3 references who can attest to your character and work ethic but are not members of your family.

Name	Contact Phone Numbers

Please provide answers to the following questions in 100 words or less. These should be type written on a separate sheet of paper.

NOTE: all questions must be answered.

10. Why do you wish to get into the EMS field?
11. What personal attributes do you bring to the emergency medical services field?
12. Tell us about yourself, your family and your interests and hobbies.
13. Please list any reasons why you may be unable to complete the 9 month EMT training program.

Award process:

- Applications will be screened by Richmond Lenox EMS Scholarship Committee.
- Potential award recipients will be interviewed at their school, by a representative from the EMS scholarship committee.
- Scholarships will be awarded based solely on the subjective opinion of the Richmond Lenox EMS Ambulance Authority. The applicants will not be judged on race, gender or age, although applicants must be 17 or older.

With my signature (or that of the students parent or guardian if under 18). I/ we authorize Richmond Lenox EMS Ambulance Authority and the Jones family to examine, review any and all personal information including but not limited to matters regarding:

- Criminal history
- Family Financial history and need
- Personal references
- Employment history
- Character
- Health history
- Educational background
- Any other areas deemed necessary to consider the applicant for this scholarship

I understand that the decision of the Jim Jones scholarship committee regarding this award is final and with my signature, waive all rights to appeal, grieve or litigate against the Jones family or Richmond Lenox EMS if I/my child do not receive this scholarship.

Signature: _____ Date: _____

Witness Signature: _____ Date: _____

Scholarship Application Deadline is 04/16/2021 @ Noon

Applications must be returned to the counseling office, or by U.S. mail to:

Richmond Lenox EMS Ambulance Authority
Attn: Jim Jones E.M.T. course scholarship
34505 32 Mile Rd.
Richmond, MI 48062