

**NAME** JENNING, DARON

- Application Complete
- FIMS
- Spreadsheet

**SAMUEL L. ABRAMS FOUNDATION  
DEADLINE MAY 31**

New Applicant     Re-applicant

**CHECKLIST:**

Graduated from one of the following schools:

- |   |  |
|---|--|
| <input type="checkbox"/> Bishop McDevitt            | <input type="checkbox"/> Middletown                            |
| <input type="checkbox"/> Camp Hill                  | <input type="checkbox"/> Red Land                              |
| <input type="checkbox"/> Cedar Cliff                | <input type="checkbox"/> Sci-Tech                              |
| <input type="checkbox"/> CD East                    | <input type="checkbox"/> Steel-High                            |
| <input checked="" type="checkbox"/> Central Dauphin | <input type="checkbox"/> Susquehanna Township                  |
| <input type="checkbox"/> Cumberland Valley          | <input type="checkbox"/> Susquenita                            |
| <input type="checkbox"/> Harrisburg                 | <input type="checkbox"/> Harrisburg Academy                    |
| <input type="checkbox"/> Lower Dauphin              | <input type="checkbox"/> Rabbi David L. Silver Yeshiva Academy |
| <input type="checkbox"/> Mechanicsburg              | <input type="checkbox"/> Trinity                               |

Completed Application

- Other Scholarship Information
- Student Resume
- FAFSA SAR EFC: \_\_\_\_\_
- Letter of Extenuating Circumstances
- Essay

Tuition Bill

Financial Aid Information

Transcript GPA: \_\_\_\_\_

School Counselor Form (only if HS applicant)

**NOTES:**

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# Samuel L. Abrams Foundation Scholarship Application

## Applicant Information

Please use proper capitalization, i.e. John A. Smith, not JOHN A SMITH or john a smith

Prefix e.g., Mr., Miss, Ms., Mrs. Mr	First Name Daron	Middle Initial	Last Name Jennings	Suffix e.g., Jr.
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Pronoun  
e.g., he, she, they  
he

Nickname or Preferred Name

Address 1 Street Address 316 Kent Drive	Address 2 Apt./Unit #
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City Harrisburg	County Dauphin County	State Pennsylvania	Zip Code 17111
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Phone  
XXX-XXX-XXXX  
717-856-0528

E-mail Address  
Please provide an e-mail address you will continue to check throughout the year  
daronnyfootball@gmail.com

Date of Birth February 11, 1999	Gender Male	U.S. Citizen Yes
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Are you Married? No	Name of Spouse if applicable
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Number of Dependents and Age(s)  
if applicable

## Family Information

Parent 1 / Caregiver 1

Relationship to Applicant

<None>

Prefix First Name Middle Initial Last Name  
e.g., Mr., Miss, Ms., Mrs.

Pronoun  
e.g., he, she, they

Employer Occupation

Address 1 Address 2  
Home Address Apt./Unit #

City State Zip  
PA

Home Phone Work Phone Cell Phone  
XXX-XXX-XXXX XXX-XXX-XXXX XXX-XXX-XXXX

E-mail Address

Please provide an e-mail address that is checked regularly

Parent 2 / Caregiver 2

Relationship to Applicant

<None>

Prefix First Name Middle Initial Last Name  
e.g., Mr., Miss, Ms., Mrs.

Pronoun  
e.g., he, she, they

Employer Occupation

Address 1 Address 2  
Home Address Apt./Unit #

City State Zip  
PA

Home Phone Work Phone Cell Phone

XXX-XXX-XXXX

XXX-XXX-XXXX

XXX-XXX-XXXX

### E-mail Address

Please provide an e-mail address that is checked regularly

Father Deceased?

No

Mother Deceased?

No

Parents Divorced?

Yes

Are you the first in your family to attend college?

No

List names, ages, and educational levels of siblings living in your household:

Name, Age, Grade, or Year in College & Name of College

Please provide any additional information regarding your family, if necessary:

I am being raised by a single parent and we need financial assistance. He is so proud of me going to college and this will be my last year.

## High School Information

High School Attending

Central Dauphin

High School Address 1

High School Address 2

City

State

Pennsylvania

Zip Code

High School Graduation Date

June 03, 2017

Cumulative GPA

3.0

Cumulative Class Rank

164

Total H.S. Class Size

400

Please provide your school counselor's name and contact information below.

Prefix

e.g., Mr., Miss, Ms., Mrs.

First Name

Last Name

Phone

XXX-XXX-XXXX

E-mail Address

## Post-Secondary Information & Educational Financing

Please list the colleges/universities to which you have applied and indicate your acceptance status.

College/University 1

Acceptance Status

La Salle	Yes
College/University 2	Acceptance Status <None>
College/University 3	Acceptance Status <None>

Year in college for upcoming school year  
Senior

Major and minor field of study  
Business and Finance

Check this box if you plan to be a full-time student.  
Yes

If you do not plan to be a full-time student,  
how many credit hours are you planning to take?

Expected College Graduation Date  
June 05, 2021

Please provide educational financing information for the school you will attend in the fall.  
If you are unsure of what school you will attend, please provide information for your first choice school.

**ALL DOLLAR FIGURES SHOULD REFLECT EXPENSES FOR ONE FULL ACADEMIC YEAR**

School  
La Salle

Expected Annual Tuition & Fees  
Total dollar figure for both fall & spring semesters  
31,650

Expected Annual Room & Board  
Total dollar figure for both fall & spring semesters  
15,150

Expected Annual Textbooks & Supplies  
Total dollar figure for both fall & spring semesters  
1,000

Where do you plan to live during the school year?  
Please indicate if you will be living in campus housing, commuting, living off campus etc.  
on campus

Are you financing your own education?  
No

How much of your education are you financing?  
dollar figure for one academic year

If no or partial, who is helping to finance your education?  
my father, scholarships, and student loans

How much of your education are they supporting per year?  
dollar figure for one academic year  
2000

Do you plan to take out student loans for the upcoming year?  
Loans include federal subsidized, unsubsidized, and private loans  
Yes

If yes, how much?  
dollar figure  
3000

Do you plan to have employment during the academic year?  
Employment includes participating in a work study program and private employment  
No

If yes, how many hours will you work per week? How  
much will you earn?  
Include hours and dollar figure

Use the space below to describe how you will finance the total of your education and provide any clarification needed for the answers given above.

I will seek out scholarships, student loans, and other methods in addition to my father helping where he can.



OTHER SCHOLARSHIP INFORMATION

Please list all other scholarships you have applied for (attach an additional sheet of paper if more space is needed):

Scholarship Name	Received	Amount: \$ _____
Leon Lowengard	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	Amount: \$ _____
Ray Shoemaker	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
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_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
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_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____



## STUDENT RESUME

List any school, community, and faith-based activities in which you have been involved in the last four years and note if it was while in high school (HS) or college (C). Be sure to include leadership roles and number of hours (hours per week/month/year, whichever is applicable). Make additional copies of this page if more space is needed.

School Activities	Timeframe		Month(s) & Year(s)	FR	SO	JR	SR	Total # Hours
	HS	C						
Resident Hall Assistant	<input type="checkbox"/>	<input checked="" type="checkbox"/>	9 months	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24 a day
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Community & Faith-based Activities	Timeframe		Month(s) & Year(s)	FR	SO	JR	SR	Total # Hours
	HS	C						
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Awards & Honors	Timeframe		Month(s) & Year(s)	FR	SO	JR	SR	Year
	HS	C						
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Work Experience			Average Hours
Employer	Position	Dates of Employment	Worked Per Week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

DaRon Jennings SAR note to TFEC – May 2020

THE STUDENT AID REPORT FOR DARON JENNINGS WILL BE SENT UNDER SEPARATE COVER

DaRon Jennings



## DaRon TFEC essay Samuel Abrams

My name is DaRon Jennings, I will be a senior at La Salle University. I am a product of a single parent home. My father is the best and he has been on this journey with me for the past three years and he is my strongest supporter. He has always instilled in me the benefit of a college education and has done a very good job of raising me. He has made me focus on what I need to do to have a good life.

When I decided to major in engineering La Salle University came to mind. It is a good college that is close to my home of Harrisburg, Pennsylvania and it has a strong engineering program. When I visited the school it felt comfortable and it felt like a place I could live for the next four years. Over the past three years it has been everything I thought it would be.