



APPLICATION

J AND K CLIMATE CHANGE SCHOLARSHIP

Applicant’s Information:

Type of Submission:

___ Video under 7 minutes OR ___ Written submission of 1,000 -2,000 words

Name: _____

Email Address: _____

Oregon degree-conferring Institution Applicant will attend at least half-time in 2026-2027 academic year._____. (If attending an Oregon authorized institution based outside of Oregon, provide proof of residency in Oregon. See rules for details.)

(Optional) Information for Additional Applicants (Scholarship will be Divided Between all Applicants. If a person is not an “Applicant,” but still is in the Video, the person needs to sign the Video Release):

Additional Applicant:

Name: _____

Email Address: _____

Oregon degree-conferring Institution Additional Applicant will attend at least half-time in 2026-2027 academic year._____. (See rules.)

Provide information for more Applicants on separate page.

May we make public the true name of each Applicant? _____.

For Video Submissions: Names of All People who Appear in Video:

1. I understand that my submission, whether or not I win a scholarship, may be chosen to be viewed on the internet and other possible public outlets, and I hereby grant permission to J and K Climate Change Scholarship to show my submission to the public.

2. I declare that the content of my submission does not violate any copyright or trademark laws.
3. I authorize my degree-conferring Institution to release to J and K Climate Change Scholarship proof of my enrollment at least half-time in Fall 2026. I will cooperate with obtaining this proof. I authorize J and K Climate Change Scholarship to share this Application and my submission with my degree-conferring institution.
4. I declare that I have researched any facts presented in my submission and that the facts presented are true and correct.
5. I declare that I am age 18 or over on the date I sign this application.
6. If my submission includes a video: a) I declare that all people in my submitted video are age 18 or older; and b) I am submitting with this application the completed Release for Appearance in Video.
7. I hereby release and discharge J and K Climate Change Scholarship and all people and entities affiliated with J and K Climate Change Scholarship from any and all liability, claims, demands, actions and causes whatsoever arising out of or relating to any litigation, claims, liability, loss, damage, or injury that may be sustained as a result of participating in this scholarship, including, but not limited to, 1) injury incurred while making a video and 2) damage as a result of sharing my submission with the public.

_____	_____
Applicant	Date
_____	_____
Additional Applicant	Date
_____	_____
Additional Applicant	Date
_____	_____
Additional Applicant	Date
_____	_____
Additional Applicant	Date

Submission instructions:

Email to info@jandkscholarship.org:

1. Video or Written Presentation AND
2. Completed Application AND
3. If Presentation is a video, Release for Appearance in Video

Questions: Email us at info@jandkscholarship.org

Deadline: July 15, 2026

RELEASE FOR APPEARANCE IN VIDEO

J AND K CLIMATE CHANGE SCHOLARSHIP

(To be signed by all people who appear in your video,
whether they are an "Applicant" or just a friend.)

I hereby give permission for my performance, likeness, and voice to be shared with the public through the internet and other means by J and K Climate Change Scholarship in connection with the video and scholarship application being submitted by Applicant _____. I consent to public disclosure of my name unless I state otherwise below. I declare that I am age 18 or older. *Attach page of additional signed Releases if necessary.*

1. _____
Signature of Person in Video Date

Printed Name of Person in Video

Optional: ____ I request that my name be kept confidential.

2. _____
Signature of Person in Video Date

Printed Name of Person in Video

Optional: ____ I request that my name be kept confidential.

3. _____
Signature of Person in Video Date

Printed Name of Person in Video

Optional: ____ I request that my name be kept confidential.

4. _____
Signature of Person in Video Date

Printed Name of Person in Video

Optional: ____ I request that my name be kept confidential.