



SCHOLARSHIP APPLICATION FOR 2016

ELIGIBILITY: ALL INFORMATION BELOW MUST BE COMPLETED. MUST MAINTAIN AT LEAST A 3.0 GPA, RESIDE IN BELL COUNTY, AND PLAN TO ATTEND A COLLEGE OR UNIVERSITY IN THE STATE OF TEXAS.

APPLICATIONS MUST BE POSTMARKED BY MARCH 31, 2016.

PERSONAL INFORMATION

NAME _____

ADDRESS _____

PHONE _____ SOCIAL SECURITY NO. _____

PLACE OF BIRTH _____ DATE OF BIRTH _____ SEX _____

NAME OF PARENTS _____

ADDRESS _____

FATHER'S OCCUPATION _____ MOTHER'S OCCUPATION _____

ANNUAL FAMILY INCOME (CHECK ONE)

_____ \$10,000-\$25,000 _____ \$26,000-\$40,000 _____ \$40,000-\$65,000
_____ \$65,000-\$85,000 _____ \$85,000-\$100,000 _____ over \$100,000

OTHER CHILDREN LIVING AT HOME? _____ IF YES, AGE(S) _____

FUNDS FOR YOUR EDUCATION WILL BE PAID BY (CHECK ALL THAT APPLY)

_____ SELF _____ PARENTS _____ SPOUSE _____ GRANTS/SCHOLARSHIPS

LIST OTHER SCHOLARSHIPS OR FINANCIAL AID YOU EXPECT TO RECEIVE AND AMOUNTS:

HAVE YOU EVER RECEIVED A SCHOLARSHIP, INCLUDING ALTRUSA, IN THE PAST?
_____ IF YES, DATE AND AMOUNT RECEIVED _____

HAVE YOU APPLIED FOR ANY OTHER SCHOLARSHIP? _____
IF YES, WHAT TYPE? _____

**ACADEMIC RECORD (ATTACH A COPY OF HS TRANSCRIPT OR COLLEGE
TRANSCRIPT OF LAST INSTITUTION ATTEND)**

NAME AND ADDRESS OF HIGH SCHOOL ATTENDED _____

GPA (1 TO 100) _____ GRADUATION DATE _____

COLLEGE YOU PLAN TO ATTEND _____

COLLEGE(S) YOU HAVE ATTENDED _____
DATES ATTENDED _____ GRADE POINT AVERAGE (1 TO 100) _____

ADDITIONAL INFORMATION

LIST ALL EXTRA-CURRICULAR ACTIVITIES YOU ARE NOW PARTICIPATING IN,
AWARD AND HONORS (INCLUDE CLUB MEMBERSHIPS, OFFICES HELD,
COMMITTEE WORK, ATHLETIC TEAMS, MUSIC ORGANIZATIONS, COMMUNITY,
CHURCH, ETC.) YOU MAY ATTACH A SEPARATE PAGE IF NECESSARY.
ORGANIZATION: _____ YEARS PARTICIPATED _____

WORK EXPERIENCE

PLEASE ALSO NOTE WHETHER OR NOT YOU PLAN TO WORK WHILE IN COLLEGE.

PLEASE ATTACH A PERSONAL STATEMENT: STATE YOUR PLANNED FIELD OF
STUDY, YOUR GOALS FOR THE FUTURE, HOW YOU PLAN TO MAKE A DIFFERENCE
IN YOUR FIELD, AND TELL US WHY YOU SHOULD BE STRONGLY CONSIDERED
FOR THIS SCHOLARSHIP.

**PLEASE ALSO ATTACH AT LEAST ONE (NOT MORE THAN 2) LETTERS OF
RECOMMENDATION** FROM FACULTY, ADMINISTRATION OR EMPLOYER.

I CERTIFY TO THE BEST OF MY KNOWLEDGE, THE INFORMATION IN THIS
APPLICATION IS CORRECT AND COMPLETE.

SIGNATURE OF APPLICANT _____ DATE _____

RETURNED COMPLETED APPLICATION BY MARCH 31, 2016 TO:

Altrusa International of Temple, Inc.
Attn: Scholarship Committee
P.O. Box 1251
Temple TX 76503