 **COMMUNITIES CINCO DE MAYO**

**P.O. Box 155038**

**Lufkin, TX 75915-5038**

**Phone: (936) 633-7659**

Must attach a recent

photo here.

**LUFKIN HIGH SCHOOL**

**SCHOLARSHIP APPLICATION**

**Deadline – March 4, 2020**

**Part I: Student Data**

Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MI\_\_\_\_\_\_\_\_\_\_

Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

S/S# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone/Cell:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Must have your counselor complete this section using your schools grading and ranking system.**

GPA \_\_\_\_\_\_\_\_\_\_\_\_ Rank \_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_ Highest Composite SAT/ACT: \_\_\_\_\_\_\_\_\_\_

Counselors Signature required: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part II. Family and Financial Verification**

Fathers/Guardians Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mothers/Guardians Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Dependent children in family and their ages (including self) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number in College (including self) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Adjusted Gross Income 2019\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (**of parents living at home or your information if independent – must be filled out to be considered**)

\_\_\_\_\_\_ Have applied and qualified for full \_\_\_\_\_ or partial \_\_\_\_\_\_ Pell. Amount \_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_ Have applied and did not qualify.

\_\_\_\_\_\_ Have applied and application still pending. List estimate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_ Do not plan to apply.

\_\_\_\_\_\_ Have not applied but plan to do so.

***Scholarships Anticipated***

Please list all scholarships or other financial aid for which you have received formal notification to date. Include scholarships you will receive through your parent’s employment.

Scholarship Source \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Scholarship Source \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part III: College/Technical School Date**

Please list three (3) colleges or technical schools where you have applied.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Accepted \_\_\_\_\_\_ Wait List \_\_\_\_\_ Pending Notification \_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Accepted \_\_\_\_\_\_ Wait List \_\_\_\_\_ Pending Notification \_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Accepted \_\_\_\_\_\_ Wait List \_\_\_\_\_ Pending Notification \_\_\_\_\_

First Choice Major \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Second Choice Major \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Degree Type: Certificate Program \_\_\_\_\_\_\_\_\_ Associates 2 yrs. \_\_\_\_\_ BA \_\_\_\_\_ BS \_\_\_\_\_ Other\_\_\_\_\_\_

Brief statement on possible career choices after college \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part IV: Student Personal Essay (Type name and school on top)**

On a separate sheet of paper describe yourself and why you think you should receive this scholarship. Use this opportunity to discuss your strengths, what you enjoy; what has influenced you, or anything that you want to communicate to the selection committee. Describe your personal characteristics, accomplishments, primary interests, plans and goals. This is an important part of the application; therefore, you should carefully prepare this essay.

**Part V: Resume or Activity List (Type name and school on top)**

On a separate sheet of paper list activities in and out of school, years participated and positions held and honors or awards received (Please include information that related to community service and/or co-curricular activities occurring during grades 9-12 and or college). Please list clubs full name (not initials).

Suggested Headings:

Activity/Organization Grade Level Position Held Honors/Awards

Employer Position From Mo/Yr To Mo/Yr

Volunteer Activity Activity From Mo/Yr To Mo/Yr Total Hours

**Part VI: Letters of Recommendation**

Letters of recommendation may be by a non-relative, employer, church member, etc. Recommendations can be mailed to Communities Cinco de Mayo, P.O. Box 155038, Lufkin, TX 75915-5038.

**ALL SECTIONS OF APPLICATION MUST BE COMPLETE TO BE CONSIDERED – DO NOT LEAVE ANY SECTION BLANK**

Student/Parent Agreement

The signatures below certify that all information contained in this application is accurate and factual. I agree to provide the scholarship donor with the address of my university’s financial aid office and proof of enrollment. **Deadline to claim scholarship is a year from High School graduation and or year from date of scholarship award.**

Applicant’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School Attending: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How Long: \_\_\_\_\_\_\_\_\_\_\_\_\_