



**San Antonio Women's Hall of Fame  
Scholarship Application  
High School Scholarship Application**  
\*scholarships available to female students residing in Bexar county, only  
Deadline for submittal: March 15, 2012

**All Information Must Be Typed or Printed**

**An incomplete application is subject to disqualification. If a question does not apply to you, please note N/A**

**All documentation requested must be attached to completed application**

**STUDENT INFORMATION**

NAME \_\_\_\_\_  
Last First name MI

SSN: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ OTHER PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

HIGH SCHOOL \_\_\_\_\_

GPA \_\_\_\_\_ SAT or ACT \_\_\_\_\_

CLASS RANK \_\_\_\_\_ # \_\_\_\_\_ OF \_\_\_\_\_

**PLEASE ATTACH CURRENT SEALED TRANSCRIPT**

THE ABOVE INFORMATION IS VERIFIED BY:

NAME OF COUNSELOR (please print) \_\_\_\_\_

E-mail \_\_\_\_\_

Signature of Counselor \_\_\_\_\_

Date: \_\_\_\_\_

**FAMILY INFORMATION**

**FINANCIAL STATUS OF PARENT/GUARDIAN:** (Check one Please):

FATHER'S/GUARDIAN'S NAME \_\_\_\_\_

FATHER'S/GUARDIAN'S OCCUPATION \_\_\_\_\_

MOTHER'S/GUARDIAN'S NAME \_\_\_\_\_

MOTHER'S/GUARDIAN'S OCCUPATION \_\_\_\_\_

TOTAL NUMBER OF PEOPLE IN YOUR HOUSEHOLD \_\_\_\_\_  
(including parents, brothers and sisters)

TOTAL HOUSEHOLD INCOME (please check one)

Less than \$16,000 \_\_\_\_\_

\$16,000 to \$20,000 \_\_\_\_\_

\$20,000 to \$30,000 \_\_\_\_\_

\$30,000 to \$40,000 \_\_\_\_\_

\$40,000 to \$50,000 \_\_\_\_\_

\$50,000 to \$60,000 \_\_\_\_\_

Over \$60,000 \_\_\_\_\_ TOTAL

WILL YOU BE THE FIRST IN YOUR FAMILY TO ATTEND COLLEGE?

\_\_\_\_\_ YES \_\_\_\_\_ NO (Please check one)

HOW MANY SISTERS/BROTHERS HAVE BEEN, OR ARE IN COLLEGE? \_\_\_\_\_

**SCHOOL/COMMUNITY ACTIVITIES**

PLEASE LIST CURRICULAR AND EXTRA CURRICULAR ACTIVITIES OR ORGANIZATIONS YOU HAVE PARTICIPATED BOTH IN AND OUTSIDE OF SCHOOL. INCLUDE ANY LEADERSHIP POSITIONS HELD. ATTACH ADDITIONAL ACTIVITIES ON A SEPARATE PAGE, IF NECESSARY.

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

**COLLEGE PLANS**

WHAT COMMUNITY COLLEGE/UNIVERSITY ARE YOU PLANNING TO ATTEND?

\_\_\_\_\_

WHAT WILL BE YOUR FIELD OF STUDY AND WHY? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HAVE YOU BEEN ACCEPTED? IF YES, PLEASE LIST SCHOOLS BELOW:

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HAVE YOU BEEN AWARDED SCHOLARSHIPS/GRANTS FOR COLLEGE? \_\_ YES \_\_ NO

IF YES, LIST BELOW THE SCHOLARSHIP/GRANT NAMES AND AMOUNTS AWARDED: \_\_\_\_\_

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For an application to be complete, all questions must be answered, have all the required signatures (applicant's and counselor's), and be **Postmarked no later than March 15, 2012 and received no later than March 19, 2012, including the following documentation:**

- \* copy of official transcript in a sealed envelope
- \* typed personal statement (no more than 1 page double spaced addressing: career goals; achievements; how you plan to help others like yourself in the future; and participation in curricular and extra-curricular activities)
- \* letter of reference

**Incomplete or late applications will not be considered in this cycle. No exceptions.**

**Please send completed application packet to:**

**Dr. Adena Williams Loston, President  
St. Philip's College  
Scholarship Committee Chair for SAWHOF  
1801 Martin Luther King Drive  
San Antonio, Texas 78203**

**For questions contact Dr. Stacey Johnson, Vice President of Academic Affairs, Palo Alto College at: [sjohnson@alamo.edu](mailto:sjohnson@alamo.edu) or 210-486-3933**

The information provided in this scholarship application is true and correct. I understand that the scholarship will only be awarded if I enroll in college and provide appropriate documentation for enrollment status as required.

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Signature of Student

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Date