



Due date for all Scholarships associated with this application is: **APRIL 5, 2019 12:00/NOON**

Graduating Students must be enrolled in the Keller Independent School District to be eligible for this scholarship.

All information requested must be submitted to your high school counselor for full consideration.

Please do not mail this application!

Name of High School: _____

Student Name		Home Phone	
Email		Cell Phone	
Address			
Father's Name		Occupation	
Employer		Work #	
Mother's Name		Occupation	
Employer		Work #	
Family Income	<input type="checkbox"/> Under \$30,000 <input type="checkbox"/> \$30,000 - \$60,000 <input type="checkbox"/> \$60,000 - \$90,000 <input type="checkbox"/> \$90,000 - \$120,000 <input type="checkbox"/> \$120,000 - \$180,000	<p>Total family income must include all sources of family income including outside financial assistance.</p> <p>How many siblings live in the home? What are their ages?</p> <p>Are there other siblings currently in college? If so, what school are they attending?</p> <p>Do you have any financial challenges and or need in your family that would impact you from attending college? YES or NO, If YES please explain.</p>	

GPA/Class Rank (MUST PROVIDE)		ACT Composite Score (MUST PROVIDE) or		SAT Score (MUST PROVIDE)	
College you plan to attend?			Major		

Provide a personal resume detailing items 1, 2, 3 & 4 or complete below.

1. Clubs, organizations or offices you've held in high school	
2. Extracurricular activities	
3. Awards	
4. Work experience (list employers, duties, hours worked per week & dates of employment)	

Personal Check List:

- ! Attach a 200-300 word essay on the reasons you feel you deserve this scholarship.
- ! Attach two (2) letters of recommendation from high school faculty.
- ! Provide copy of school transcript.
- ! Documented copy of ACT or SAT scores.

By signing this document, I verify that all of the information I have provided here is true, correct, up to date, and complete. Should it be determined that my application includes false information, I understand that I will be disqualified from consideration. If I am awarded scholarship funds based on false, outdated or incomplete information, I understand that I will be required to refund The Greater Keller Womens Club Foundation the entire scholarship amount, plus interest and expenses.

The Greater Keller Women's Club and The Greater Keller Women's Club Foundation has permission to use the child's name and photo in any and all publications as it relates to this scholarship.

Parent Name

Parent Signature

Student Name

Student Signature

Please note the guidelines on scholarships timeline:

To avoid forfeiture, this scholarship must be used by June 30, 2020 unless The Greater Keller Women's Club Foundation is contacted for a deferment in writing. Maximum deferment of one year will be granted on a case-by-case basis.