

TCASA SCHOLARSHIP APPLICATION FORM

FAMILY PROFILE

1. Applicant's name: _____
Last First Middle Initial

2. Current Mailing Address: _____
Street City Zip

3. Permanent Mailing Address: _____
(If different from above) Street City Zip

4. Home Telephone Number: _____ Cell Phone Number: _____

5. Sex _____ Age _____ Date of Birth _____ Place of Birth _____

6. Are you a United States citizen? _____

7. How long have you resided in Texas? _____ Which County? _____

8. With whom do you currently reside? _____ Name: _____

9. Father's Name: _____ Occupation: _____

10. Name and Address of Father's Employer: _____
Years with Employer: _____

11. Mother's Name: _____ Occupation: _____

12. Name and Address of Mother's Employer: _____
Years with Employer: _____

13. Will your parents contribute to the cost of your education? Both ___ Mom only ___ Dad only ___

14. Please list below all immediate family members (excluding Parent/Guardians) living at home:

Name	Age
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

15. Number of brothers or sisters currently attending post-secondary institutions: _____

Name of the post-secondary institution each is attending: _____

ACADEMIC PROFILE

16. GPA: _____ on a college 4.0 point scale (unweighted) Ranking GPA: _____ (weighted)

17. Class Rank: _____ out of _____ (class size) Date Ranked: _____

18. PSAT: Critical Reading: _____ Math: _____ Writing Skills: _____

19. SAT: Critical Reading: _____ Math: _____ Writing: _____

20. ACT: English: _____ Math: _____ Reading: _____ Science: _____ Composite: _____

21. Name of High School(s) Attended: _____

22. High School Graduation Date: _____

23. College, university or trade school you wish to attend:

- First Choice: _____ Applied Accepted
 - Second Choice: _____ Applied Accepted
- Proposed College Major: _____

24. Briefly describe how you plan to use this major following graduation from college.

25. List other scholarships you have received or anticipate receiving.

Scholarship _____ Amount _____

Scholarship _____ Amount _____

Scholarship _____ Amount _____

Scholarship _____ Amount _____

Scholarship _____ Amount _____

Scholarship _____ Amount _____

Scholarship _____ Amount _____

Scholarship _____ Amount _____

EXTRACURRICULAR PARTICIPATION

26. List seven (7) of your most significant leadership roles, honor, and/or awards extended to you while a student in high school.

Name of Activity	Year(s)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

27. List five (5) extracurricular school activities in which you have been most significantly involved as a student in high school.

Name of Activity	Year(s)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

28. List three (3) community and/or church activities in which you have been most significantly involved while a student in high school.

Name of Activity	Year(s)
_____	_____
_____	_____
_____	_____

ALL INFORMATION CONTAINED HEREIN IS TO BE KEPT STRICTLY CONFIDENTIAL.

WORK EXPERIENCE

29. List any employer(s) for whom you have worked during high school.

Employer	Duties	Employment Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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SELF-APPRAISAL

30. In the space below, please explain in light of everything you have shared thus far, why you feel you both NEED and MERIT this scholarship. Please do so in your own handwriting. You may use the back.

Please return your completed application to 1326 FM 155 La Grange TX 78945