



## 2017 Scholarship Application

### INSTRUCTIONS

- APPLICATION PACKET - Due 4/7/2017 to Guidance Office (submitted by student)**
  1. Application Form – Complete all pages, including this page; points deducted for incompleteness
    - NEW! \$1,000 Scholarship Category Requirements
      - General: Qualified candidates must attend a four-year institution in 2017-18 and not have a full tuition scholarship (8 available)
      - Fine Arts: Qualified candidates must attend a four-year institution in 2017-18, completion of at least one Fine Arts course in CISD and not have a full tuition scholarship (1 available)
      - Special Programs: Qualified candidates must attend a two or four-year institution in 2017-18, have Special Ed/504/ESL designation in CISD and not have a full tuition scholarship (1 available)
  2. Brief Essay
    - Prompt: What was your most memorable Dragon moment? Why?
    - Max Words: 500
    - Font: Times New Roman, Size 12 font, 1.5 spacing
    - May not be written nor proofed by a professional writer
  3. Letter of Recommendation (community member only, not teacher; submit on letterhead)
  4. School Transcript (copy only)
- TEACHER EVALUATION - Due 4/7/2017 to Guidance Office (submitted by teacher)**

*Note: No resume needed. All information should be filled in on application. Aside from this page, please do NOT include your name on any form, essay, letter or recommendation.*

### APPLICANT INFORMATION

**SCHOLARSHIP CATEGORY (select one):** \_\_\_ General \_\_\_ Special Programs \_\_\_ Fine Arts

*Please complete and print clearly.*

Applicant Full Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Father/Guardian Name \_\_\_\_\_ Email: \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_ Email: \_\_\_\_\_

*If awarded and later determined I am no longer able to attend the institution full-time in Fall 2017 I will notify CEF within 5 business days. I also understand that acceptance of a full tuition scholarship from another source disqualifies me for this scholarship and I will notify the foundation within 3 business days.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**All information will be kept strictly confidential**



**CARROLL**  
EDUCATION  
FOUNDATION™

**2017 Scholarship Application**

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**ACADEMIC INFORMATION**

CISD Enrollment Year \_\_\_\_\_ SAT score \_\_\_\_\_  
Current GPA \_\_\_\_\_ ACT score \_\_\_\_\_  
College or University preference \_\_\_\_\_

**EXTRACURRICULAR/VOLUNTEERING**

Activity/Organization	Year(s)	Position/Responsibilities

**Volunteer Work/Service Hours:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(May use an additional page if necessary)

Applicant # \_\_\_\_\_  
(Guidance Office use only)



## 2017 Scholarship Application

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**Awards/Honors:** \_\_\_\_\_

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**Outside Interests/Hobbies:** \_\_\_\_\_

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### EMPLOYMENT INFORMATION

Were you employed during the school year?      No                      Yes                      If yes, hours per week: \_\_\_\_\_

Were you employed during the summer break?      No                      Yes                      If yes, total hours: \_\_\_\_\_

For internships, please note if paid/unpaid and if it fulfilled a requirement for a course or program.

Employer	Role Description	Address	Dates Employed



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### TEACHER EVALUATION FORM

*(All information kept strictly confidential. Teachers: Please turn in directly to the Guidance Office by 4/7/17.)*

**Applicant**

Scholarship Category (student chooses one):      \_\_\_ General    \_\_\_ Special Programs    \_\_\_ Fine Arts

**Teacher**

The purpose of the Carroll Education Foundation scholarship is to support the vision of the Carroll Independent School District. Criteria for selection of CEF scholarship recipient(s) include academic record, SAT/ACT scores, involvement in school and community, work/internships and character and leadership qualities. Please provide full evaluation, to the best of your knowledge, on this form. **Please exclude applicant name.**

A. Academics \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. Character (i.e. initiative, cooperation, dependability, teamwork, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. Extracurricular Activity participation/leadership \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

D. Other Comments \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Teacher Printed Name**

\_\_\_\_\_  
**Subject/Course(s)**

\_\_\_\_\_  
**Teacher Signature**

\_\_\_\_\_  
**Date**