

Education Foundation GALENA PARK INDEPENDENT SCHOOL DISTRICT

14705 Woodforest, Houston, Texas 77015

(832) 386-1226

Cathy Ethridge Foundation and Special Events Coordinator

April 11, 2019

Guidelines for Galena Park ISD Education Foundation Daniel Bazan, Jr. Memorial Scholarship Applicants

- 1. One (1) scholarship of at least \$1,000 will be awarded to a graduating senior from either Galena Park High School or North Shore Senior High School. The amount of any additional money will depend upon monies available through this scholarship fund.
- 2. The scholarship will be awarded on the basis of aptitude, desire and need.
- 3. The scholarship is to be used at the <u>college of the winner's</u> choice for either academic or vocational courses.
- 4. The recipient shall carry a minimum of 12 semester hours.
- 5. Finalists may be selected and given personal interviews to help the committee determine the winner.
- 6. The recipient will be notified within a week of the interviews and will be honored at the May meeting of the Galena Park Community Council PTA.
- 7. The scholarship money will be available for the <u>fall semester</u>. If the recipient is not able to attend college at that time, the monies will stay in the budget for two years. In the event that the recipient does not enroll and attend in the designated time period, the scholarship will be forfeited and redeposited into the scholarship fund.
- 8. All applications must be submitted by Thursday, May 2, 2019 to:

Galena Park High School – Ms. B. Couch North Shore Senior High School – Ms. H. Hegman CTE Early College High School - Ms. J. Soders

The interviews may be held and the finalists will be notified of the interview schedule.

Note: Scholarship winner must submit a transcript of his/her grades to the Galena Park ISD Education Foundation Scholarship Committee chairman upon completion of the semester.

Sincerely,

Cathy Ethnidge
Cathy Ethridge

Galena Park ISD Education Foundation The Daniel Bazan, Jr. Memorial Scholarship Application

APPLICANT'S GENERAL INFORMATION (PLEASE PRINT OR TYPE)									
1		(Name)	_						
Pe	rmanent Mailing Address	S:							
				()				
	(City)	(State)	(Zip Code)		(Home Phon	e Number)			
				((Cell Phon	e Number)			
INCOME STATEMENT									
1.	Number of adults in the	e family							
2.	2. Number of dependent children in the family								
3.	3. Number of dependent children who will attend college in the Fall								
4.	If both parents reside at the same address, do they both work?					Yes	No		
5.	. Is this a single parent family?					Yes	No		
6.	Estimated annual college costs (tuition, room and board, etc.)								
7.	If your parents(s)/spouse are disabled or unemployed: How long?								
PERSONAL INCOME STATEMENT									
1.	Are you currently emplo	oyed?	_ How many hours per we	eek?		_			
2.	How long have you been employed at least 10 hours per week?								
3.	Do you contribute your own money to support your family?								
4.	If so, what percent of your income goes to family support?								
5.	Do you have a savings account? How much is saved for college?								
4.									

FAMILY INFORMATION								
Applicant's Place of Birth: (City, State, Country)								
Date of Birth:								
Father's Name:(First))	(Last)						
Mother's Name:(First))	(Last)						
APPLICANT'S ACADEMIC STATUS AND HIGH SCHOOL INFORMATION								
High School:								
Address:								
City:	State:	Zip Code:						
High School Counselor's Name:								
High School Counselor's Office Telephone Number: ()								
Name of college or university you plan to attend:								
Planned major:								
CERTIFICATION AND AUTHORIZATION								
senior in high school enrolled in or a hereby authorize the Galena Park I:	of the information provided on this form is true and complete to the best of my knowledge. I certify that I am a nior in high school enrolled in or applying for full-time enrollment to college for the 2019-20 academic year. I reby authorize the Galena Park ISD Education Foundation to utilize information about my application and likeness for publicity and public relations purposes.							
AUTHORIZATION FOR RELEASE OF RECORDS To comply with the provisions of the Family Educational Rights and Privacy Act of 1974, permission is hereby given to school officials to release the secondary school record and other requested information for consideration in the Daniel Bazan, Jr. Scholarship Program.								
Signature:		Date:						
		Date:ake sure your transcript (NO double-sided						
copies) and letter of recommendation		,,						

SUPPORTING DOCUMENTS

Transcripts, Personal Statement, Letter of Recommendation

- A high school transcript that contains the student's class rank, grade point average and test scores must be submitted with the application in a sealed envelope.
- Applicants must submit a personal statement that provides information about their background, community
 involvement, career goals, and desire to contribute to their community. Information about unique personal or
 financial circumstances may be added. Applicants should consider the personal statement as the equivalent to an
 interview. Statements must be 1-2 pages in length.
- A one-page letter of recommendation from a teacher or school official is required. The letter should detail the
 applicant's background, achievements, leadership abilities and community involvement. Letters should contain
 personalized information about the applicant. Form letters will be given minimum consideration.