

ASBERRY ALUMNI-DOROTHY SANDERS HOUSTON
SCHOLARSHIP FUND FOUNDATION

SCHOLARSHIP APPLICATION

1. Name: _____
last first middle

2. Address: _____
street city zip

3. Phone: _____
home cell other

4. High School: _____

5. School Phone: _____

6. School Address: _____
street city zip

7. Father's Name: _____
last first middle

8. Mother's Name: _____
last first middle

9. College information: _____
Applied?: _____ Accepted?: _____

10. Degree plan: _____

11. Your vocation plan is: _____

12. Please type the following on a separate sheet and attach to this application:

- a. A chronological listing of all activities(school/community), honors information you feel will be of interest to the Scholarship Panel.
- b. Resume of work experience. Be specific in description of work. Include names, addresses, and phone numbers of employers.

13. Additional Information Required:

- a. School transcript, including Fall semester of graduating year, GPA, and rank.

I hereby authorize the Scholarship Committee/Panel to examine my school transcript and other school records. I certify that the information contained in this application is accurate to the best of my knowledge and belief. If awarded a scholarship, I agree to abide by and fulfill all requirements appertaining thereto.

Applicant's signature Date

Parent/Guardian Signature Date