SHINER HIGH SCHOOL

LOCAL SCHOLARSHIP PROGRAM APPLICATION

Fellowship of Christian Athletes (FCA) Leader Scholarship

QUALITIES TO BE CONSIDERED: Academic achievement; desire to succeed; perseverance and persistence to accomplish goals; community involvement; volunteer work; willingness to return to our community and encourage others to follow your lead; **YOU MUST HAVE BEEN AN FCA LEADER FOR 2 OR MORE YEARS**

Name: _____

First Middle Last

Address: _____

Phone Number: _____ Place of Birth: _____

Father's Name: _____ Father's Occupation: _____

Mother's Name: _____ Mother's Occupation: _____

Names and ages of your siblings: _____

_____

STUDENT'S ACADEMIC STATUS: Please see attached transcript.

Class Rank _____ Number in Class _____ GPA _____

SAT Scores: Evidence-Based Reading & Writing _____ Math _____ Combined _____

ACT Scores: English _____ Math _____ Reading _____Science _____ Composite _____

Name of the college, university, or trade school that you will be attending next year:

_____

Intended major or area of study: _____

IN ADDITION TO THIS APPLICATION, PLEASE SUBMIT A 500 WORD ESSAY ABOUT HOW BEING A LEADER HAS IMPACTED YOU DURING HIGH SCHOOL.

PLEASE BE SURE TO INCLUDE YOUR RESUME AND TRANSCRIPT WITH THIS APPLICATION.