TRACY HIGH SCHOOL
Tom Hawkins Basketball Scholarship 2027
$500

First Name_____Last Name_____

Mailing Address:_____

City_____State_____Zip Code_____

Home Phone# ( )_____Cell #( )_____DOB_____Age____Sex M F

ACADEMIC INFORMATION:
Grade Point Average_____ Class Ranking or Standing_____
SAT Score: _____ ACT Score:_____
College or University you plan to attend_____
Major Course of Study you will pursue_____

APPLICANT'S FAMILY:
Father's Name_____ Occupation_____

Mother's Name_____ Occupation_____

Please list other children and dependents living at home:

Name	Age	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

#Dependents in College_____

College expenses for year of application: Tuition $_____Room/Board $_____

How much will your family contribute to your education? _____

Will you be applying for financial aid? Yes_____ No_____

Please describe any unusual financial circumstances:_____
_____
_____
_____

If you are working now, how many hours per week? _____

Community Service:

_____
_____
_____

Hobbies:

_____
_____
_____

Sports Played**:**

_____
_____
_____

<u>Qualifications for nominee to apply include:</u>

- **Graduating Senior**
- **Community Service Volunteer**
- **Basketball: Two or more years of high school basketball**
- **GPA of 2.5 or better**

RETURN COMPLETED APPLICATION TO THE CAREER CENTER A104 ON OR BEFORE **March 15, 2027**

(Applications will be forwarded to Susan and Joyce Hawkins)