

APPLE SPRINGS HIGH SCHOOL



OLD TIMERS & ALUMNI SCHOLARSHIP PACKET

**RETURN COMPLETED PACKET TO COUNSELOR
BY APRIL 1ST**

A completed application consists of 2 page application, essay, resume, two recommendation forms and one copy of Scholarship List showing scholarships submitted.

Checklist to make sure complete:

- Complete two page application form
- Get Student and Parent signature if under 18 years of age
- Attach resume (See sample attached)
- Attach single spaced essay
- Two Recommendation Forms (use the attached forms)
- Two pre-addressed envelopes for return of recommendations
- Submit to the High School Counselor on or before April 1st.

Sample Acceptance Letter, Page 6 (If you receive the ASHS Old Timers & Alumni Scholarship, the acceptance letter you will be presented during graduation must be signed and returned to the high school counselor before money will be transferred to AC.)

Sample Thank You Letter, Page 7 (If you receive the ASHS Old Timers & Alumni Scholarship please use the sample letter as a guide to assist you in writing a thank you letter to the donor association.)

RETURN TO COUNSELOR
DUE: APRIL 1

Part I: Student Data

Last Name: _____ First Name: _____

Address: _____ Phone #: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Age: _____ Email: _____

Please attach a recent head and shoulders photograph of yourself here. This is for identification purposes only; it helps put a face with a name. Professional photographers are not necessary. Photocopies of the photographs are acceptable.

To be completed by the School Coordinator using school's grading and ranking system.

GPA on 100 _____ Rank: _____ of _____ Date of rank: _____

ACT Composite: _____ SAT: _____ (cr & math only)

_____ Date signed: _____

Counselor Signature

Financial Information: **List only members in your household. If divorced list custodial parent.**

Father/Step Father/ Guardian: _____ Employer _____

Mother/Step Mother/Guardian: _____ Employer _____

Student's employer: _____ Others in household attending college: _____

Dependent children in family including self: _____ Ages: _____

Adjusted Gross Income – (From most current Tax Return) **ONLY parents living in household.**

0-\$20,000 21,000 to 40,000 41,000 to 60,000 61,000 to 80,000 81,000 to 100,000 100,000 plus

_____ Have completed FAFSA at www.fafsa.ed.gov and my EFC is _____

_____ Have applied and application still pending. List estimated EFC (www.collegeboard.com)

Scholarships Received: Please list all scholarships or financial aid for which you have *received formal notification* to date. Include scholarships you will receive through your parent's employment.

Scholarship Source: _____ Amount: \$ _____

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Scholarship Source: _____ Amount: \$ _____

Financial Aid: _____ Amount: \$ _____

Part II: 2 year colleges, 4 year colleges, or technical schools

First Choice College: _____ Accepted: _____

Second Choice College: _____ Accepted: _____

First Choice Major: _____ Second Choice Major: _____

Circle plans after high school: Military Work 2 year college 4 year college
Technical School Wait a semester and then attend Unknown

Part III: Essay Requirement: (Type student name and school at top of page) Essay should be single spaced. This essay helps the committees know more about you. No maximum length.

Personal Statement about yourself: Describe yourself and why you feel you should receive this scholarship. Use this chance to tell about your strengths, what you enjoy, what has influenced you. Describe your personal characteristics, accomplishments, primary interest, plans and goals.

Part IV: Resume or Activity List (Type name and school at top)

Extracurricular activities/clubs and organizations, community service, awards and honors, work experience, skills.

Part V: Two Recommendations (Recommendations forms are included in packet.) Give recommendation form to someone who knows you and can give a good recommendation. All recommendation forms need to be received by the counselor on or before April 1st. Recommenders can email, fax, or mail them but the forms should not be returned to students. Mail or return directly to high school counselor.

1. Recommendation from 9th -- 12th grade teacher
2. Recommendation from someone from the community who can add helpful information about you.
(Ex: employer, pastor)

Part VI: Student/Parent Agreement: Read and Initial

_____ I agree to provide the scholarship donor a Scholarship Acceptance Form with the address of my college's financial aid office and/or proof of enrollment.

_____ I also agree to send a thank you note to my scholarship donor(s).

Applicant's Signature: _____ Date: _____

Parent/Guardian Signature if not 18: _____ Date: _____

High School Attending: _____ How Long: _____

Scholarship Recommendation Form

RETURN RECOMMENDATION FORM TO HIGH SCHOOL COUNSELOR by April 1st

Apple Springs ISD, P.O. Box 125, Apple Springs, Texas 75926 FAX: 936-831-2824

Section 1: Applicant Information (To be completed by applicant)

Name of Student: _____

Section 2: Applicant Evaluation (To be completed and submitted by recommender)

I would compare the student with other individuals of the same level as follows:	No information 0	Below Average 1	Average 2	Above Average 3	Exceptional 4
Intellectual ability					
Writing ability					
Speaking ability					
Leadership ability					
Academic preparation					
Interpersonal skills					
Willingness to learn					
Maturity					
Initiative					
Responsibility / dependability					
Loyalty					
Promptness					
Attention to detail					
Honesty and integrity					
Motivated					

Comments / Additional information about student's abilities, attitude, needs, etc.

Name of Recommender: _____

Title: _____

Place of Employment: _____

Date: _____

Email Address: _____

Phone #: _____

**Please mail or fax completed form to: HIGH SCHOOL COUNSELOR
Apple Springs ISD, P.O. Box 125, Apple Springs, Texas 75926 FAX: 936-831-2824**

Scholarship Recommendation Form

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Leadership ability					
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Interpersonal skills					
Willingness to learn					
Maturity					
Initiative					
Responsibility / dependability					
Loyalty					
Promptness					
Attention to detail					
Honesty and integrity					
Motivated					

Comments / Additional information about student's abilities, attitude, needs, etc.

Empty box for comments and additional information.

Name of Recommender: _____

Title: _____

Place of Employment: _____

Date: _____

Email Address: _____

Phone #: _____

Please mail or fax completed form to: HIGH SCHOOL COUNSELOR
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(SAMPE RESUME)

Mary Lamb

100 FM 2501, Apple Springs, Tx 75926 (936) 831-xxxx

Apple Springs High School

mlamb@applesprings students.org

Extra-Curricular Activities / Clubs & Organizations

- JV Basketball team—2 years
- Varsity Basketball team—2 years
- Student Council member—3 years
- Student Council President-1 year

Community Service

- Helped organize peers to work at the animal shelter
- Worked with my church building houses for Habitat for Humanity
- Assisted in serving meals to homeless and needy once a month

Honors/Awards

- All District Basketball team
- #1 Ratings for Solo/Ensemble Competition in Band- 2 years
- Outstanding Eagle Pride Club Member –sophomore year

Work Experience

- Babysitter—10 hours per week (Aug. 20XX-May 20XX)
- Cashier at Orange Leaf—30 hours per week (June 20XX-Aug. 20XX)
- Waiter at Red Lobster-25 hours per week (Sept. 20XX-present)

Skills

- Proficient in Microsoft Office & MACBOOK (imovie, keynote, prezi)
- Excellent team member –can be a leader but also a great follower

(Sample Award & Acceptance Letter)

May XX, 20XX

Name of Student
Address of Student
City, State Zip

Dear _____

Congratulations! It is a pleasure to inform you that you have been selected to be a recipient of a scholarship from the Apple Springs High School Old Timers and Alumni Association for the 20XX academic year. The ASHS Old Timers and Alumni Scholarship Fund was created through the generosity of former Apple Springs High School students, faculty, and supporters. The scholarships were established to support the efforts of current Apple Springs's graduates to achieve post-secondary educational degrees and or certifications.

Your scholarship check will be deposited directly to the school listed below. It may be used for tuition, fees and books or other educational expenses and does not have to be repaid.

SCHOLARSHIP INFORMATION:

Institution: Angelina College
Total scholarship amount: \$500

IMPORTANT:

- In order for the scholarship to be paid out, you must return a signed copy of this letter as proof that you have accepted the scholarship.
- To determine the tax implications and impact on other financial aid you are receiving, please check with your financial aid office at AC for more information.

Best wishes for a productive and enjoyable year at Angelina College.

Sincerely,

Joan Davis Ragland
Secretary/Treasurer
ASHS Old Timers and Alumni Association

____ I **do not** accept the scholarship because _____.

____ I **accept** the scholarship and authorize the ASHS Old Timers and Alumni Association to release information regarding my award to my school and to the media.

Signature of recipient: _____ Date: _____

(SAMPLE THANK YOU LETTER)

Recipient's name
Address
City, State Zip

Current date

Apple Springs High School Old Timers and Alumni Association
P.O. Box 183
Apple Springs, Texas 75926

Dear Members of the ASHS Old Timers and Alumni Association,

I would like to express my sincere gratitude for the generous scholarship you awarded me. I appreciate the fact that the alumni of Apple Springs continue to support the educational efforts of its graduates.

This scholarship will enable me to focus on my studies at Angelina College. I will be enrolling (or I have enrolled) for the fall (summer or spring) semester at AC and will be pursuing a degree (certification or certificate) in _____ (enter field of study, such as nursing, education, welding, etc.)

Sincerely,

First & Last Name

First and Last Name
ASHS Senior 20XX