

Staple

**** Return to the counselor's office by February , 2010 ****



Here

Office Use Only

HOUSTON ENDOWMENT INC.

APPLICATION

JESSE H. JONES SCHOLARSHIPS FOR MEN MARY GIBBS JONES SCHOLARSHIPS FOR WOMEN

**APPLICANT
DATA**

Last Name _____ First _____ Middle Initial _____

Permanent Home _____

Mailing Address _____ Apartment # _____

City _____ State _____ Zip code _____ Home Telephone _____

Social Security # _____ Student's Cell Phone _____

Date of Birth: Mo. _____ Day _____ Yr. _____

Student's Email Address: _____

Please indicate your gender and race/ethnicity. (For statistical purposes only) Male Female

African American/ Black American Indian or Alaska Native Asian (include Indian subcontinent)

Caucasian/White Hispanic/Latino Multi-Racial Other (please specify) _____

**PARENT OR
GUARDIAN
INFORMATION**

Father's name _____ Phone _____

Address* _____

Mother's name _____ Phone _____

Address * _____

* If different from student's address

Check the applicable block:

____ I live at home with both parents

____ I live in a single parent household with my _____

____ Other: please explain if you live with a guardian, grandparent or have other arrangements: _____

Ages of siblings _____ Number of siblings in college now _____

**POST-
SECONDARY
SCHOOL
DATA**

High School graduating from _____ Year _____

Have you applied for admission to a college? _____ Have you been accepted? _____

Which one or ones? _____

What field of study do you wish to pursue? _____

How much money have you saved for your college education? _____

How much financial assistance for college expenses can you expect annually from parents, relatives or other sources? _____

ARE YOU APPLYING FOR ANY OTHER SCHOLARSHIPS OR LOANS? _____

Name of scholarship or loan	Amount	Status
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**** This section must be reviewed and signed by the parent or guardian.**

PLEASE CIRCLE THE AMOUNT THAT BEST DESCRIBES YOUR FAMILY'S ANNUAL GROSS INCOME:

- | | | | | |
|----------------------|----------------------|------------------------|------------------------|-------------------|
| Less than \$10,000 | \$30,001 to \$40,000 | \$70,001 to \$90,000 | \$130,001 to \$150,000 | \$200,001 or more |
| \$10,001 to \$20,000 | \$40,001 to \$50,000 | \$90,001 to \$110,000 | \$150,001 to \$175,000 | |
| \$20,001 to \$30,000 | \$50,001 to \$70,000 | \$110,001 to \$130,000 | \$175,001 to \$200,000 | |

**Please indicate whether the student is eligible for the subsidized lunch program in the current school year. Yes ___ No ___

** Parent's/Guardian's Signature _____

PLEASE ATTACH A COPY OF YOUR FAFSA4caster Federal Student Aid Eligibility report. (See attached sample.) The FAFSA4caster website is <https://fafsa4caster.ed.gov>. See your school counselor for instructions. You will need 2008 financial information, including 2008 Federal Income Tax Returns for you and your parents.

ACTIVITIES INFORMATION

If space provided in any section is insufficient, you may continue on additional sheets of paper using the same format.

List all school activities in which you have participated in the past four years, such as student government, music, sports, etc.:

<u>Activity</u>	<u>No. of Years Participated</u>	<u>Offices Held</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List all extra-curricular activities in which you have participated during the past four years, such as Boy Scouts, Girl Scouts, hospital volunteer, Special Olympics, etc.:

<u>Activity</u>	<u>No. of Years Participated</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

List any special honors or awards you have received:

**UNUSUAL
CIRCUMSTANCES**

If you have any unusual family or personal circumstances that have affected your ability to achieve in school or participate in school and/or community activities, please explain:

STUDENT'S STATEMENT

Attach a statement of not more than 150 words summarizing your plans as they relate to your educational and career objectives, your long-term goals, and reasons why a scholarship is desired.

RECOMMENDATION LETTER

A letter of recommendation from a principal, teacher or school official familiar with your qualifications must be attached. A second letter may also be included, but is not necessary.

FORM LETTERS ARE NOT ACCEPTABLE

TRANSCRIPT INFORMATION

This section must be completed and signed by the appropriate school official. An official high school transcript of grades must be sent with this application. If the student has taken the SAT and/or ACT tests more than once, **please use the highest score, regardless of when it was taken.**

Applicant ranks _____ in a class of _____

Cumulative Grade Point Average: Weighted: _____/4.0 scale Unweighted: _____/4.0 scale

SAT scores (3 part):

Critical Reading (CR)/Verbal: _____ Math: _____ Written: _____

Essay (optional): _____ Total Verbal, Math & Written: _____

Composite ACT score: _____

Note if scores are not in yet, date test was taken: _____

School Official's

Signature _____ Title _____ Date _____

APPLICATION CHECKLIST

_____ Application with all sections completed, signed and dated by student

_____ Student's FAFSA4caster Estimated Federal Student Aid Eligibility report

_____ Student's statement, signed and dated

_____ Letter of recommendation

_____ High school transcript

_____ Photograph – Enclose in an envelope a sharp, recent photograph, approximately 2.5" wide x 3.5" high, **appropriate for newspaper publication.** Head and shoulders preferred, not with friends or any glamour shots. Print your name and high school clearly on the back of your photograph. The picture will not be returned.

Are you an immediate family member of or otherwise related to any Houston Endowment board member, officer or staff person? Yes _____ No _____ If yes, please describe that relationship: _____

APPLICANT'S SIGNATURE _____ Date _____