

EOAC Scholarship Fund Application

Information

Full Name of Applicant

Grade

Current School

Street Address

City

State

Zip

Email

Phone

Items Required for Application

Completed Application Form

High School Transcripts

College Transcripts (if applicable)

Student Income (if applicable)

Parent/Guardian Income (if applicable)

College Acceptance Letters

Recommendations:

One Administrator (Principal, Assistant Principal, Counselor, Academic Advisor, Dean)

One teacher in science, math, English, or history (*high school applicants*)

One professor from a class directly related to major (*college applicants*)

One work supervisor recommendation (If you do not have an employment history, please identify one person who can attest to your work ethic in school, attendance, and initiative)

Please forward completed application and all supporting documentation to hr@eoacwaco.org, or fax application to 254-754-0046 or mail application and all supporting documentation to:

EOAC

Attn: HR

500 Franklin Ave,

Waco, TX 76701

Incomplete applications will not be considered. Incorrect Applications will not be considered. Please follow all instructions listed carefully.

Scholarship Type

Have you ever participated in any EOAC program? _____ Yes _____ No

If "Yes", which program?	Number of Years Attended
List any former names used during program attendance	

Have you ever worked for EOAC? _____ Yes _____ No

List any names used during employment

If not employed by EOAC, do you have any friends and/or relatives working for EOAC?

_____ Yes _____ No

List names of friends/relatives

Financial

List other means of support (scholarship, grants, and loans) or percent you will have to work to continue to go to school. *If you are employed, please list your job and provide proof of income (W-2, paystubs, etc.). Note: incomes does not automatically qualify or disqualify the applicant.*

Number of dependents you support

Names of dependents and their relationship to you

Name:	Name:	Name:	Name:
Relationship:	Relationship:	Relationship:	Relationship:

What percentage of your estimated costs will be provided by parent or guardian example; 10%, 50%, etc. or other Sources (Scholarships, Loans, etc.).

If supported by parent/guardian, please include proof of parent/guardian income (W-2, paystubs, income statements, etc.)

Education: Current

High School Attended

Other Educational Institution

Current GPA

List Advanced Courses

List Dual Credit Courses

Other Considerations

Student initiatives (Extracurricular, Co-Curricular, Academic, Volunteer work, etc.)

List the educational institution(s) you have been accepted to or have applied.
(Please attach copies of acceptance letters to this application)

Mentors

List one or two mentors that help you, encourage you, listened to you, provided guidance, and given directions and input to you. People you will always be able to go to in career and life. Describe their effect on you now.

School and Career

Define your plan for school and career. What goals have you set? Where do you want to be in 5 years? How will the EOAC Scholarship help you achieve your goals? Why is education important? Outline format or bullets may be used.

**Please attach all supporting documentation for application.*

I certify that all the information listed above is true and correct. Incomplete, or incorrect applications will not be considered. Misrepresenting any information will disqualify the application from consideration.

Print Name

Signature

Date