

SCHOLARSHIP APPLICATION FORM

SAN PATRICIO ELECTRIC SCHOLARSHIP FUND  
402 E. SINTON ST. P. O. DRAWER 400  
SINTON, TEXAS 78387

Name \_\_\_\_\_ Social Security # \_\_\_\_\_ Telephone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Father/Husband Name \_\_\_\_\_ Occupation \_\_\_\_\_

Mother/Wife Name \_\_\_\_\_ Occupation \_\_\_\_\_

Number of dependent children in family (including applicant) \_\_\_\_\_

How many other family members are currently in college? \_\_\_\_\_

Are you or your parents active members of San Patricio Electric Cooperative? \_\_\_\_\_

If yes, give name and address under which account is billed \_\_\_\_\_

\_\_\_\_\_

Which institution of higher education do you plan to attend?

1<sup>st</sup> choice \_\_\_\_\_ 2<sup>nd</sup> choice \_\_\_\_\_

Have you applied for admission? \_\_\_\_\_ Estimate college expenses for one (1) year \_\_\_\_\_

Have you received any other scholarships? \_\_\_\_\_ If so, how much? \_\_\_\_\_

Social Security # \_\_\_\_\_

Page 2

In applying for this scholarship, I am aware that I must be considered a full time student, and demonstrate acceptable standards of citizenship and character.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

To be completed, this Application must be accompanied by:

- An official transcript from the school the Applicant has most recently attended
- A copy of SAT/ACT scores (if available)
- Three letters of recommendation

I agree to permit the review of this Application and my school records by anyone representing San Patricio Electric Cooperative Scholarship Fund. I also agree to allow San Patricio Electric Cooperative to use my picture in newspaper ads, the Texas Co-op Power magazine, and other announcements.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Parent or Guardian

Social Security # \_\_\_\_\_

Page 3

List academic honors received in High School \_\_\_\_\_

---

---

School related clubs, activities, achievements \_\_\_\_\_

---

Community clubs, activities, achievements \_\_\_\_\_

---

Work Experience:

Name of Employer

Type of Work

Length of Service

---

---

---

In approximately 100 words, write in your own handwriting "My future life plans and how this scholarship will aid me".

---

---

---

---

---

---

---

---

---

---