



## FBFN Foundation

*The Charitable Arm of Fort Bend Friends and Neighbors*

### **Scholarship Application for High School Students**

This scholarship will be awarded to a student residing in Fort Bend County and graduating from a public high school campus in Fort Bend County. The scholarship will be applied to tuition and fees at a Fort Bend County campus of Houston Community College, Wharton County Junior College, Texas State Technical College or University of Houston-Sugar Land. Scholarship payments will be made in 2 installments directly to the institution.

The scholarship committee of the FBFN Foundation considers the applications on the basis of need, academics, activities, recommendations and the student's personal letter. *Perceived need is the first priority.* All scholarships are contingent upon the qualifications of applicants and the availability of funds.

#### Instructions

1. Must be a resident of Fort Bend County and a graduate of a Fort Bend County public high school, a U.S. citizen, and not related to a FBFN Foundation Board member or a Scholarship Committee member.
2. Must be planning to attend a Fort Bend County campus of Houston Community College, Wharton County Junior College or Texas State Technical College or University of Houston-Sugar Land in the fall semester of year of application and enroll for a minimum of 9 semester hours.
3. Return this completed application with the following:
  - a. A personal letter stating educational goals, reasons for applying for this scholarship and other information significant to the awarding of this scholarship.
  - b. An official copy of your transcript, copy of your current report card, and official copy of SAT or ACT test scores (if not provided on transcript.)
  - c. A copy of your birth certificate and naturalization papers, if applicable.
  - d. A letter of recommendation from a current English or math teacher.
  - e. A letter of recommendation from your employer, if you have been employed in the past two years.
  - f. Optional - Any other letters from community members/teachers who have information that would be helpful to the committee.

**Please submit completed applications and questions to [FBFNScholarship@gmail.com](mailto:FBFNScholarship@gmail.com),  
See our website for deadlines and more information.**



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### Scholarship Application for High School Students

**Please Print**

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_

Telephone: (H) \_\_\_\_\_ (C) \_\_\_\_\_ Email: \_\_\_\_\_

Current High School: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Father's Employer: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Employer: \_\_\_\_\_

Father's Income: \_\_\_\_\_  
Below \$40,000  
\_\_\_\_\_ \$40,000 - \$70,000  
\_\_\_\_\_ \$70,000 - \$100,000  
\_\_\_\_\_ Above \$100,000

Mother's Income: \_\_\_\_\_  
Below \$40,000  
\_\_\_\_\_ \$40,000 - \$70,000  
\_\_\_\_\_ \$70,000 - \$100,000  
\_\_\_\_\_ Above \$100,000

Additional sources of income and amount: \_\_\_\_\_

Explanatory Comments (if any): \_\_\_\_\_

List the names and ages of any brothers and/or sisters who are currently attending college.

Name: \_\_\_\_\_ Name of College: \_\_\_\_\_ Proposed Grad. Date: \_\_\_\_\_ Amt. of Financial Aid \_\_\_\_\_

Where do you plan to attend college in the fall?

1<sup>st</sup> choice: College \_\_\_\_\_ Campus \_\_\_\_\_

2<sup>nd</sup> choice: College \_\_\_\_\_ Campus \_\_\_\_\_

Major and/or Career Choice: \_\_\_\_\_

High School Class Rank: \_\_\_\_\_ in a class of \_\_\_\_\_

SAT Scores: Read/Write \_\_\_\_\_ Math \_\_\_\_\_ Essay (Read) \_\_\_\_\_ (Anal) \_\_\_\_\_ (Write) \_\_\_\_\_  
Total \_\_\_\_\_

ACT Scores: Composite \_\_\_\_\_ Math \_\_\_\_\_ Science \_\_\_\_\_ STEM \_\_\_\_\_ English \_\_\_\_\_ Reading \_\_\_\_\_  
Writing \_\_\_\_\_ ELA \_\_\_\_\_

School activities, offices held and honors: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Volunteer and Community Activities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Hobbies and Interests: \_\_\_\_\_

\_\_\_\_\_

Work Experience in the past two years (Give dates, responsibilities, supervisor's name, and phone number):

\_\_\_\_\_  
\_\_\_\_\_

Current number of hours working per week \_\_\_\_\_

Use additional pages as needed.

Have you applied for or received any Financial Aid? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Have you been awarded any other scholarships at this time? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, list scholarship(s) and amount awarded \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**AFFIRMATION:**

The information provided in this application is, to the best of my knowledge, complete and accurate in its entirety. I understand that incomplete or inaccurate applications will not be considered for a scholarship. I also understand this information will be reviewed and may be verified, if necessary. In applying for this scholarship, I grant permission to publish my name and photograph for publicity and promotional purposes.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_