The Charitable Arm of Fort Bend Friends and Neighbors



Scholarship Application for College Students

This scholarship will be awarded to a student residing in Fort Bend County and graduated from a Fort Bend County public high school campus. 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 directly to the institution.

The scholarship committee of the FBFN Foundation considers the applications based on 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

- 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.
- Must be planning to attend a Fort Bend County campus of Houston Community College, Wharton County Junior College, 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.
- Return this completed application with the following:
 - □ A personal letter stating educational goals, reasons for applying for this scholarship and other information significant to the awarding of this scholarship.
 - ☐ An official copy of your college transcript and a copy of your midterm report, if available. (Must include class enrollment for spring semester.)
 - ☐ A copy of your birth certificate and naturalization papers, if applicable.

Official high school transcript. (This may be included with the application package or mailed by the school.)
A letter of recommendation from a <u>current</u> professor.
A letter of recommendation from your employer, if you have been employed in the past four years.
Optional - Any other letters from community members/teachers who have information that would be helpful to the committee.

Completed applications and all supporting documents are due by noon on Wednesday, March 13, 2024.

Please submit either electronically below or by email to FBFNScholarship@gmail.com or by mail to FBFN Foundation, Attention: Nancy Byrne, P.O. Box 19008, Sugar Land, TX 77496.

Submit paperwork here: https://www.dropbox.com/request/eCMXZ2nukwMMpXdy2oUI

Questions or to submit your paperwork FBFNScholarship@gmail.com



Application for College Students

Please Print

Name:(Last)	(First)	(Middle)			
Address (include stree	et address, city and ZIP	,	_ (must be in Fort Bend County)		
Telephone: (H)	(C)	Email:			
Current College:		High School attended:			
Father's Name:	Occupation:				
Father's Employer:					
Mother's Name:	Occupation:				
Mother's Employer: _					
	\$40,000 - \$70,000 \$70,000 - \$100,000 Above \$100,000	\$70, Abo	,000 - \$70,000 ,000 - \$100,000 ve \$100,000		
Additional sources of	income and amount:				
Explanatory Commen	ts (if any):				

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							
List the names and ag	es of any brothers and/o	r sisters who are curre	ently attending college.				
Name: Na	ame of College:	Proposed Grad. Da	te: Amt of Financial Aid				
Where do you plan to	attend college in the fall		/)				
1 st choice college	t choice college campus						
2 nd choice college	nd choice collegecampus						
•	hoice:						
High School Class Rank:in a class of Year							
SAT Scores: Total	Evidence-based Rea	ading & Writing	Math				
ACT Scores: Composite Reading Writi	e Math Scie ing ELA	nce STEM	_ English				
School Activities and F	Honors:						
Community Activities:							
Hobbies and Interests:	:						

Work Experience in past 4 years (Give dates, responsibilities, supervisor's name and phone number):

Use additional pages as needed.				
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:			
Parent Signature:	Date:			