ANAHUAC ATHLETIC BOOSTER CLUB SCHOLARSHIP APPLICATION

· PARENTS MUST BE MEMBERS OF THE ATHLETIC BOOSTER CLUB.
·STUDENT MUST PLAY AT LEAST ONE SPORT AND COMPLETE THE SEASON.
·STUDENT MUST HAVE TAKEN **ACT** OR **SAT**.

LAST NAME FIRST NAME MIDDLE NAME

ADDRESS TELEPHONE

PARENTS NAME

ARE YOUR PARENTS A MEMBER OF THE ATHLETIC BOOSTER CLUB? **YES/NO**

HAVE YOU TAKEN THE ACT OR SAT? **YES / NO**

NUMBER OF TIMES**:**_____

DATES TAKEN SAT: _____ _____ _____

DATES TAKEN ACT: _____ _____ _____

TO DATE HAVE YOU RECEIVED ANY OTHER SCHOLARSHIPS: **YES / NO**
PLEASE
LIST:_____
_____
.

COLLEGE YOU PLAN TO ATTEND: _____

COURSE OF STUDY:_____

YOU **MUST** USE THE FORM ON BACK TO LIST YOUR HIGH SCHOOL AND COMMUNITY ACTIVITIES. YOU **MUST** ALSO ATTACH A RESUME.

WRITE A SHORT ESSAY DESCRIBING WHAT THIS SCHOLARSHIP WOULD MEAN TO YOU AND ATTACH IT TO THE APPLICATION.

ARE YOUR PARENTS AWARE OF THIS APPLICATION: YES / NO

DEADLINE: MAY 15, 2009

SIGNATURE OF APPLICANT DATE