

Scholarship Application

Fort Bend County Chapter Prairie View A&M University Alumni

*****General Scholarships available for students who are residents of Fort Bend County and who are students currently attending a school in the Fort Bend County area.*****

Application must be postmarked or hand delivered by:

June 30, 2018, 5:00 p.m.

These **required documents** must be attached to the scholarship application:

- (1) Official high school transcript
- (2) Official document showing grades of your current semester / year (college students)
- (3) Letter of Acceptance from PVAMU for the upcoming year
- (4) **A typed essay of not less than three hundred fifty (350) words.** The essay must be:
 - a. Double-spaced
 - b. Times New Roman Font
 - c. 12 point font
 - d. One-inch top, bottom, and side margins

In your essay, tell us about yourself and why you are applying for this scholarship. Please be clear about how this scholarship will help you achieve your personal and professional goals.

If you are reapplying, and you are currently enrolled at PVAMU, tell us about your experiences at PVAMU from the time of enrollment to the present.

- (5) Attach a recent wallet-size photo to the application.
- (6) Submit two (2) recommendation letters from non-relatives, in separate sealed envelopes, addressed to the Scholarship Committee Chairperson.
- (7) If reapplying, the applicant must provide evidence of maintaining a 2.5 GPA.

****Scholarship recipients will be selected by a Fort Bend County Chapter PVU Alumni committee based on information submitted by the applicant. In order to receive proper consideration, please attach all required documents to your Scholarship Application.**

Scholarship Application

Fort Bend County Chapter Prairie View A&M University Alumni

Application must be postmarked or hand delivered by:

June 30, 2018, 5:00 p.m.

Mailing Address:

**Mrs. Irene Crenshaw
Scholarship Committee Chairperson
Fort Bend County PVU Alumni Chapter
1110 Blue Diamond Drive
Missouri City, TX 77489**

Questions or inquiries:

Mrs. Irene Crenshaw, (281) 437-0771

APPLICANT INFORMATION

Full Legal Name _____

Street Address _____

City _____ State _____ Zip Code _____

*County _____ High School _____ District _____

Date of Birth _____ Gender Male Female

Contact - Mobile () _____ Home () _____ Alternate () _____

E-mail _____

Have you previously applied for and received a scholarship award from this Ft. Bend County Chapter? Yes No If so, when? (List all applicable dates & amounts)

Date: _____ Amount: \$ _____ Date: _____ Amount: \$ _____

FAMILY INFORMATION

Legal Guardian _____

Street Address _____

*County _____ City _____ Zip Code _____

Contact - Mobile (____) _____ Home (____) _____ Alternate () _____

E-mail _____

Occupation _____ Place of Employment _____

Other Dependent Children (Name/Age) _____

ACADEMIC INFORMATION

Number of students in your graduating class _____ Your rank _____

List the field(s) of study you wish to pursue: _____

List other scholarships you have been awarded and the amount: _____

List any honors and awards you have received: _____

Describe your participation in any extracurricular and co-curricular activities: _____

Describe your participation in any church, community and service activities: _____

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Fort Bend County Chapter
Prairie View A&M University Alumni**

CERTIFICATION

This Fort Bend County Alumni Chapter offers scholarship opportunities to students, who are residents of Fort Bend County and who are students of a high school in the Fort Bend County area, who will attend and have been enrolled in Prairie View A&M University.

_____ (Initials)

Upon receipt of your application, the Committee will make whatever reference checks it deems appropriate. The Committee may request interviews with applicants. All qualified applicants will be considered regardless of sex, race, color, religion, sexual preference, or national origin.

The Committee reserves the right to withdraw a scholarship previously awarded upon receiving evidence that the need as described in this Application has significantly changed.

If after receiving scholarship proceeds, the Applicant/Recipient decides, regardless of the reason, to either defer, withdraw or simply not to attend classes at PVAMU and is subsequently withdrawn from the University, the Applicant/Recipient agrees to reimburse this Chapter 100% of proceeds previously received, within 30 days of not reporting to classes and/or of the withdrawal. _____ (Initials)

Scholarship recipient must submit proof of enrollment, via mail, within 30 days after classes begin. Failing to do so will jeopardize future scholarship awards. _____ (Initials)

I hereby certify that all the information on this application form is true, complete, and correct to the best of my knowledge and belief and is made in good faith.

PRINTED

APPLICANT/Parent or Guardian
(if Applicant under 18)

DATE

RELEASE

I hereby agree to permit the release of records pertaining to consideration of this application to committee members and Officers of the Fort Bend County Chapter Alumni Scholarship Program.

APPLICANT/Parent or Guardian

DATE(if Applicant under 18)