

# Eagle Mountain-Saginaw ISD Student Scholarship Application

Boswell HS

Chisholm Trail HS

Saginaw HS

Watson HS

DEADLINE FOR COMPLETE APPLICATION: FEBRUARY 16, 2018

## EMS ISD Student Scholarship Application Instructions

This scholarship application automatically considers you for many local scholarships, including the EMS ISD Education Foundation, PTO\* and PTA scholarships, local business scholarships and more! You only need to complete *this single application* to be eligible for dozens of local scholarships, which generally range from \$250 to \$1,000 each. The criteria for selecting winners vary from scholarship to scholarship. For example, some scholarships are awarded based upon grades and test scores, while others are considered for extra-curricular activities and citizenship, so please answer each question with as much detail as possible. These scholarships may also be awarded to students interested in a particular field of study (i.e. education, athletics, etc.), so it is important that you complete the entire application, along with submitting two teacher recommendations forms. **Incomplete applications will not be considered.**

### Guidelines and Useful Suggestions:

1. **The student application is due to the Guidance Counselor's office no later than *February 16, 2018 at 4:00 p.m.***
2. **The two teacher recommendation forms must be submitted to the Counseling office by the teachers no later than *February 16, 2018 at 4:00 p.m.***
3. **THE APPLICATION MUST BE TYPED IF NOT COMPLETED THROUGH ONLINE FORM.** Hand-written applications will not be accepted. The EMS ISD scholarship application is available to download from the websites: [www.emsef.org](http://www.emsef.org) and [www.emsisd.com/boswell](http://www.emsisd.com/boswell). (On the Boswell website, navigate to Counseling Home Information to download the application.)
4. All questions must be answered. Only these forms can be used to record information for this scholarship. Please use only the space provided on the application to respond to each question. Do not attach resumes or any extra sheets with additional information to this scholarship application, as attachments are NOT allowed.
5. Do not include your name or the name of any family member in any of the questions. The only place your name should be is on the Cover Page and the last sheet of this application packet where your signature is required. If you are under 18, your parent must also sign this application.

**Useful tips:** Spell and punctuate correctly. Have someone else check your work for mistakes. *If you do not have access to a typewriter or computer to type this application, please speak with your Guidance Counselor for assistance.*

*\* In order to qualify for the PTO scholarships, at least ONE member in the immediate family must be a PTO member.*

Are you currently a PTO member? Yes      No      If yes, who is the member? \_\_\_\_\_

**Not applicable for Saginaw High School Students.**

*If no, membership is \$5.00. Applications for membership and payment may be submitted along with this scholarship application for the PTO scholarship consideration by the deadline.*

Student ID #: \_\_\_\_\_

## **2018 EMS ISD SCHOLARSHIP APPLICATION COVER PAGE**

STUDENT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ANTICIPATED GRADUATION DATE: \_\_\_\_\_

HIGH SCHOOL ATTENDING: \_\_\_\_\_

STUDENT ID NUMBER: \_\_\_\_\_

Return this form to the Counseling Department by 4:00 p.m. on February 16, 2018. Also, ask the teachers who are completing the teacher recommendation forms to return them to the Counseling Department by February 16, 2018. It is your responsibility to make sure this application is completed by the deadline.

----- Cut Here -----

**Staple to front of one teacher recommendation**

Teacher Recommendation Form for: \_\_\_\_\_

***Student Name***

\_\_\_\_\_  
***Student ID Number***

**Student must complete this slip** before stapling it to recommendation form and giving to the teacher of choice.  
Due to the Counseling Department by February 16, 2018.

----- Cut Here -----

**Staple to front of one teacher recommendation**

Teacher Recommendation Form for: \_\_\_\_\_

***Student Name***

\_\_\_\_\_  
***Student ID Number***

**Student must complete this slip** before stapling it to recommendation form and giving to the teacher of choice.  
Due to the Counseling Department by February 16, 2018.

Student ID #: \_\_\_\_\_

## **2018 EMS ISD SCHOLARSHIP APPLICATION**

Applicants are urged to complete this form as accurately and concisely as possible and to be prepared to supply additional information upon request. Grammatical usage and neatness are important. Application must be typed. **This student application, and the cover sheet must be returned to the Counseling Department by February 16, 2018 to be considered. The two teacher recommendations must be returned by the teachers no later than February 16, 2018.**

Student ID: \_\_\_\_\_ Male      Female      Birth Date: \_\_\_\_\_

Have you been accepted for admission at a college/junior college? Yes      No      . If yes, which one(s)? \_\_\_\_\_

Which college/junior college or trade school do you plan (or wish) to attend at this time?

\_\_\_\_\_ What is your intended major? \_\_\_\_\_

<b>Please list all other scholarships you are applying for and amount (if applicable):</b>	<b>Please list all scholarships already awarded and the dollar amount of each (if any):</b>

Please list all Elementary, Middle, and High Schools you have attended IN THIS DISTRICT:

\_\_\_\_\_

### **FAMILY INFORMATION:**

#### **PRIMARY RESIDENCE / LIVING WITH (check one and list occupations):**

Father and mother      Occupation(s): \_\_\_\_\_

Father and stepmother      Occupation(s): \_\_\_\_\_

Stepfather and mother      Occupation(s): \_\_\_\_\_

Father or mother only      Occupation: \_\_\_\_\_

Guardian(s)      Occupation(s): \_\_\_\_\_

Do either of your parents/guardians work for the EMS ISD?      Yes      No      If yes, please list their occupation and location: \_\_\_\_\_

How many brothers and/or sisters do you have? \_\_\_\_\_ Their ages: \_\_\_\_\_

Student ID #: \_\_\_\_\_

**GROSS YEARLY FAMILY INCOME – (estimated)**  
*Please check one:*

- 0 - \$25,000
- \$26,000 - \$40,000
- \$41,000 - \$55,000
- \$56,000 - \$75,000
- \$75,000 - \$100,000
- \$100,000 - \$150,000
- Over \$150,000

List the number of people in your family who are currently living at home and the number of family supported, including brothers and sisters, attending college. Describe your family’s financial condition as it pertains to your anticipated college expenses.

**RESPONSE:**

List the courses you have taken in high school. Include Honors, Gifted/Talented and Advanced Placement. Use the following designations: H, G/T, or AP.

9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>

List all extra-curricular activities (clubs, athletics, fine arts, hobbies, etc.) in which you have been involved during your high school years (school, church, community, etc.).

Activities	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>	Offices/Leadership Positions Held

Student ID #: \_\_\_\_\_

Please list all paid work experience and volunteer work or activities you have participated in during your high school years. Please remember to include any PTO volunteer hours.

Paid Work Experience	Hours Per Week	Dates from:	Dates to:
Volunteer Work Experience	Hours Per Week	Dates from:	Dates to:

1. List awards, honors, or special recognitions you have received from the school and/or community during your high school years.

**RESPONSE:**

2. What are your long-range goals? What is your education plan after your high school graduation? (Include your choice of college or trade school and major, and any activities you plan you participate in during college.)

**RESPONSE:**

Student ID #: \_\_\_\_\_

3. Give specific reasons why you are applying for this scholarship?

**RESPONSE:**

4. List any additional information about yourself or your family (work experience, biographical information, family hardships, etc.) that you feel would be helpful in assessing your financial needs and qualifications for a scholarship. Please describe any unusual circumstances you wish to be considered (personal, family, health, etc.).

**RESPONSE:**

Student ID #: \_\_\_\_\_

I also understand that submission of this application carries with it approval for the Eagle Mountain-Saginaw Independent School District to release any appropriate information pertaining to the applicant's school records.

Printed or Typed Name of Applicant

Applicant's Signature

Date \_\_\_\_\_

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Parent/Guardian Signature

Date \_\_\_\_\_

(Required only if applicant is under 18 years of age.)

Student ID #: \_\_\_\_\_

**Eagle Mountain – Saginaw ISD**  
**2018 Student Scholarship Application**

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**FOR OFFICE USE ONLY**

GPA	CLASS RANK	SAT CR	SAT MATH	SAT WR	SAT TOTAL	ACT COMPOSITE



Student ID #: \_\_\_\_\_

## 2018 EMS ISD Student Scholarship TEACHER RECOMMENDATION FORM

Student ID Number: \_\_\_\_\_

It is my pleasure to recommend this student for scholarship consideration.  
My impression of this individual is indicated below.

Outstanding = 3      Average = 2      Below Average = 1      Unable to rate = 0

1. Demonstrates high standards of honesty and reliability.
2. Promptly meets responsibilities.
3. Demonstrates desirable qualities such as neatness, poise, and stability.
4. Upholds principles of morality and ethics.
5. Cooperates fully with all school rules.
6. Demonstrates refinement and good taste.
7. Demonstrates originality.
8. Takes constructive lead in classroom activities.

*Additional comments (or attach a separate page if you wish):  
Do not use the student's name in your comments.*

**TEACHER:** RETURN TO THE COUNSELING DEPARTMENT BY **February 16, 2018.**

Teacher Printed Name: \_\_\_\_\_

Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Subject Taught: \_\_\_\_\_

Student ID #: \_\_\_\_\_

## 2018 EMS ISD Student Scholarship TEACHER RECOMMENDATION FORM

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**TEACHER:** RETURN TO THE COUNSELING DEPARTMENT BY **February 16, 2018.**

Teacher Printed Name: \_\_\_\_\_

Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Subject Taught: \_\_\_\_\_