## COLORADO COUNTY AREA GO-TEXAN 2024 SCHOLARSHIP APPLICATION

Full Name		
Address		<del></del>
County you reside in		Age
Are you a United States Citizen? to apply for any Colorado County Area Go-Texan must be furnished with this application.)		
High School Information		
Name of High School:	Graduati	on Date:
Name of Registrar:	Phone:	
Email address of Registrar:		
Number in Graduation Class:	Your Class Rank:	Date of Rank:
Scholastic Grade Average for Four Ye (Scholastic average must be expressed on a MUST convert it to a 4.0 scale to be consider	4.0 scale UNWEIGHTED. If your sc	
SAT Score: ACT Score:	Date of Exam(s):	
years, any positions of leadership he recognition, please indicate years ac	eld, and any special honors re	ceived. If a repetitive award or
Extracurricular Activities – list any clawards, recognition, or offices held.		ed, indicating any other
Scholastic Grade Average for Four Ye (Scholastic average must be expressed on a MUST convert it to a 4.0 scale to be consider SAT Score: ACT Score: ACT Score: Extracurricular Activities – list any convertion of leadership here.	Your Class Rank: On what so 4.0 scale UNWEIGHTED. If your so red for application.) Date of Exam(s): activities you have participated, and any special honors reshieved. Example: National Head of Example:	cale?

**Community Activities** – please outline any other activities in which you participate, indicate any special recognition you might have received. For example, church/synagogue activities or community service project. You may attach additional sheet if necessary.

Organization	Community Service	Date(s)	Duration
v (5 v/) 6 li			
Name of Parent(s) or Guardiar			
Occupation and Employer of P	arent(s) or Guardian		
<del>-</del>			
Number and ages of Brothers	and Sisters still at home	or in colleg	e
List any jobs you have had or a	are currently holding. Also,	please detail how im	portant it will be
for you to work while in colleg	e and plans you have to sec	cure employment whi	ile in college: _
School or College you plan to a	attend		
Have you applied for admissio			
, What field of study do you wis			
lave you saved for your furthe			
How much financial assistance	can you expect from parer	nts relatives or other	r sources?
How much financial assistance	e can you expect from parer	nts, relatives, or other	r sources?

Confirmed, or Rejected. You may attach	an additional sheet if r	necessary.
Name of Scholarship, Grant or Loan	Amount	Status
scholarship might be to you.	,	etc.) and what value this
	nscript	etc.) and what value this
<ul> <li>Attach a copy of High School Tran</li> <li>Attach a copy of ACT/SAT Score</li> <li>Attach two letters or recommend</li> <li>Attach a copy of FASFA Score</li> </ul>	nscript dation ained in this applicatio	n are true, accurate, and
<ul> <li>Attach a copy of High School Tran</li> <li>Attach a copy of ACT/SAT Score</li> <li>Attach two letters or recommend</li> <li>Attach a copy of FASFA Score</li> <li>I hereby certify that the statements cont</li> <li>complete and that I presently meet all elements</li> </ul>	nscript dation ained in this application igibility requirements s	n are true, accurate, and set forth in this Application.
<ul> <li>Attach a copy of High School Tran</li> <li>Attach a copy of ACT/SAT Score</li> <li>Attach two letters or recommend</li> <li>Attach a copy of FASFA Score</li> <li>I hereby certify that the statements cont</li> <li>complete and that I presently meet all el</li> </ul>	nscript dation ained in this application igibility requirements s	n are true, accurate, and set forth in this Application.
<ul><li>Attach a copy of ACT/SAT Score</li><li>Attach two letters or recommend</li></ul>	nscript dation ained in this application igibility requirements s	n are true, accurate, and set forth in this Application.
<ul> <li>Attach a copy of High School Tran</li> <li>Attach a copy of ACT/SAT Score</li> <li>Attach two letters or recommend</li> <li>Attach a copy of FASFA Score</li> </ul> I hereby certify that the statements cont complete and that I presently meet all elements. Signature of Applicant: Date:	nscript dation ained in this application igibility requirements s	n are true, accurate, and set forth in this Application.
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Attach a copy of High School Tran Attach a copy of ACT/SAT Score Attach two letters or recommend Attach a copy of FASFA Score I hereby certify that the statements cont complete and that I presently meet all electric signature of Applicant:  Date:  Signature of Parent or Guardian:	nscript dation ained in this application igibility requirements s	n are true, accurate, and set forth in this Application.