



**Applicant's Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Date Of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone Number: \_\_\_\_\_  
mm dd yyyy

Address: \_\_\_\_\_  
Street P.O. Box

\_\_\_\_\_  
City State Zip Code

Name of High School: \_\_\_\_\_

G.P.A.: \_\_\_\_\_ College Major: \_\_\_\_\_

Have you applied for Blinn College? \_\_\_\_\_ Blinn ID # B00 \_\_\_\_\_

**Financial Information**

Are you receiving other financial aid or scholarships for the upcoming academic year? \_\_\_\_\_

Have you applied for other Scholarships? \_\_\_\_\_ Have you filled out your FASFA? \_\_\_\_\_

If no, why not? \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ Full time or part time \_\_\_\_\_

For consideration of this application, you must take classes on the Schulenburg campus.

Student must maintain a 2.0 G.P.A.

*Please return application to:*

*Blinn College 100 Ranger Dr Schulenburg, TX 78956*