

**ROCKWALL COUNTY REPUBLICAN WOMEN'S CLUB
2011 SCHOLARSHIP
APPLICATION**

**Completed applications must be postmarked by Thursday, March 10, 2011.
Mail it to:**

**Republican County Republican Women
P.O. Box 1354
Rockwall, TX 75087**

**For additional information call the Scholarship Chair at 972-771-3574 or
e-mail: jlf_fisher@hotmail.com**

Please type the information into a Word document. Do not submit photos.

1. PERSONAL PROFILE:

Name: (Last, First, Middle – Nickname): _____

Permanent Address: (street): _____

City: _____ Zip: _____

Phone: (where you can be reached): _____

E-mail: _____

Birth Date: _____ Age: _____

Father/Step Father/Guardian:

Name: _____

Address: _____

Employer, number of years, position: _____

Mother/Step Mother/Guardian:

Name: _____

Address: _____

Employer, number of years, position: _____

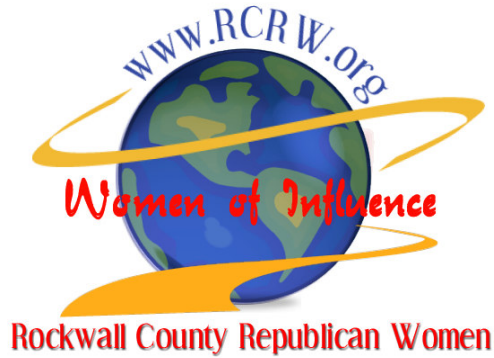
Brother(s) and/or Sister(s):

Name(s): _____

Age(s): _____

School or Work: _____

Employment: (if applicable)



Name of employer: _____
Describe duties: _____
Number of hours per week: _____

2. NAME OF HIGH SCHOOL:

3. CUMULATIVE GPA AND QUARTILE:

4. SAT SCORE: _____ **ACT SCORE:** _____

5. COLLEGES/UNIVERSITIES TO WHICH YOU APPLIED:

6. COLLEGES/UNIVERSITIES TO WHICH YOU HAVE BEEN ACCEPTED:

7. COLLEGES/UNIVERSITIES YOU WILL ATTEND, IF DECIDED:

8. FINANCIAL NEED:

Do you plan to file a financial aid form with your college or university?

9. CAREER CHOICE:

Write a short paragraph on the back.

10. REFERENCES:

Employer:

Name: _____

Company: _____

Address: _____

Phone No: _____

Teacher:

Name: _____

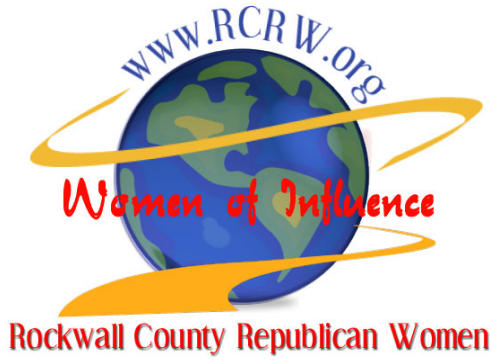
School: _____

Adult:

Name: _____

Address: _____

Phone No: _____



11. ACTIVITIES PROFILE

ACADEMIC ACHIEVEMENT:

(List)—

Year(s)	Honor(s)	Description
_____	_____	_____
_____	_____	_____

LEADERSHIP POSITIONS:

(List)—

Year(s)	Honor(s)	Description
_____	_____	_____
_____	_____	_____

EXTRA-CURRICULAR ACTIVITIES:

(List)—

Year(s)	Organization	Description	Hours per Week
_____	_____	_____	_____
_____	_____	_____	_____

COMMUNITY SERVICE:

(List)---

Year(s)	Organization	Description	Hours per Week
_____	_____	_____	_____
_____	_____	_____	_____

COMMUNITY AWARDS:

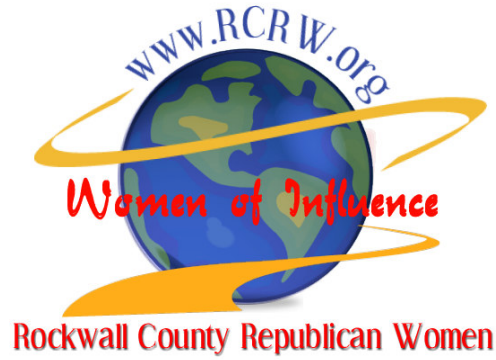
(List)—

Year(s)	Honor	Description
_____	_____	_____
_____	_____	_____

12. OTHER INFORMATION DEEMED PERTINENT:

13. QUESTIONS: (Answer these questions in 250 words or less per answer.)

1. If you had to choose the most inspirational person from the public sector, who would that be and why?
2. What qualities do you possess that would influence this committee to choose you as a scholarship recipient over others?
3. What are your plans and future aspirations?



4. What about the current political scene do you find interesting?

Transcript Release: A transcript of your grades must be furnished.

I hereby certify that the information on this application is true and do authorize the school to release a transcript to the requesting scholarship committee.

Date: _____ Signed: _____

Parent signature, if student is under 18: _____

The three finalists will be asked to speak at the RCRW **May 19, 2011** meeting at the downtown historical courthouse. The three scholarships will be awarded that night.

Should you have any questions, please contact Jerry Fisher Scholarship Chairman at 972-771-3574 or email: jlf_fisher@hotmail.com.