

**Girls' Service League, Inc.**  
**APPLICATION FOR EDUCATIONAL SCHOLARSHIPS**

**Completed application must be mailed to:**

Girls' Service League, Inc.  
 Director of Educational Scholarships  
 4528 W. Vickery Blvd., Suite 104  
 Fort Worth, Texas 76107

**DEADLINE FOR RETURN OF APPLICATION IS Thursday, JANUARY 16, 2020**

This application will cover one full academic year.

**IMPORTANT NOTE:**

Applicants must be a citizen of the United States and have **resided in Tarrant, Johnson or Parker County, Texas** for a period of **at least one (1) year** prior to filing the application with the Girls' Service League and be **attending or applying for acceptance in an accredited Texas college or university**. High school and returning college students must have a minimum 3.0 GPA. Trade schools are not applicable for this grant process (applicant must be applying for an undergraduate degree to a two (2) or four (4) year Texas accredited college or university). Please refer to the Announcement page on [www.girlsserviceleague.org](http://www.girlsserviceleague.org)

**REQUIRED DOCUMENTS:**

- Completed and signed application by due date (**incomplete or applications sent after Thursday, January 16, 2020 will be rejected**)
- Photograph – (4"X6" picture of applicant only; with name and address written on the back)
- Information and Photo release form
- Completed and signed CRITERIA FOR EDUCATION SCHOLARSHIPS form
- School transcript (if recently out of school – minimum 3.0 GPA)
- Essay explaining your need for the scholarship and how you feel college will help you reach your life goals (format as defined in cover letter)
- Reference letters should be from contacts listed on application.
- Copy of personal (if independent) or parent(s) most recent tax returns and W-2.
- Proof of residency (hard copy of utility bill or lease agreement).

During the processing of your application, you will be contacted by a member of the scholarship committee for further information and/or to schedule a personal interview.

APPLICANT INFORMATION

*Application must be complete and where answers are not applicable enter (NA).*

Name of Applicant: Last		First		Middle Initial	
Date of birth (month/day/year):		SSN:	Phone:		
U.S. Citizen:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	College ID (if Known):	Cell:	
E-mail:					
Permanent Address – Street:					
City:	State: Texas		ZIP Code:		
County:	How long?				
Current Address (if different from permanent address) Street:					
City:	State: Texas		ZIP Code:		
County:	How long?				
	Name	Address and Zip Code		Occupation	
Father:					
Mother:					
Guardian 1:					
Guardian 2:					
Parent permanent email address:					

FAMILY INFORMATION									
Marital Status:	Single		Married		Divorced		Widowed		
Do you have children?	Yes		No		If Yes, list number of children:		Age(s):		
Other dependents:									
Are you employed?	Yes		No		Employer:				
How long have you been employed?					Salary:				
Do you plan to work while in school?	Yes		No		Expected income?				
List only if you are living with or being supported by your parent(s) or guardian(s).									
Where will you live?	On campus		Apartment		Dormitory		Parents		

APPLICANT'S EDUCATION DATA									
List schools attended:									
Name of School				City/State			Dates Attended		G.P.A
Have you ever been denied admission, dismissed or placed on probation at any school or college?							Yes		No
If Yes, please give details:									
College classification as of 9/1/2020:		Freshman		Sophomore		Junior		Senior	
Have you been accepted?	Yes		No	Semester and hours taking (must have 12 hours min)					
What college or university do you plan to attend?									
Location of college:									
Proposed undergraduate major:					Date to receive degree:				
If high school senior, what is the date of your high school awards ceremony?									

FINANCIAL SUPPORT INFORMATION									
Have you applied for other scholarships, loans, grants?					Yes		No		
Please identify ALL resources and/or assistance you expect to receive:									
Parents:									
Relatives:									
Employment:									
Social Security Benefits:									
Veterans Administration Benefits:									
Other sources (identify) including loans, financial aid or other scholarships:									
							Total amount of assistance:		\$

**REFERENCE INFORMATION**

Applicant's listed contacts for references will be sent a recommendation form; the form will need to be returned to the Girls' Service League office by the contact person. Please be sure to let your contact know that you have listed them as a reference with our organization regarding a scholarship award. It is important to stay in communication with your contact to ensure the reference letter is returned by the due date listed on the form.

\*Please fill out two (2) references from the following categories **(references may not be family members)**.

<b>High School Teacher or Counselor</b>	<b>College (if applicable)</b>
Name:	Name:
Address:	Address:
Phone:	Phone:
School:	School:
Name:	Name:
Address:	Address:
Phone:	Phone:
School:	School:
<b>Business (if applicable)</b>	<b>Personal</b>
Name:	Name:
Address:	Address:
Phone:	Phone:
Business:	Relationship:
Name:	Name:
Address:	Address:
Phone:	Phone:
Business:	Relationship:

**SIGNATURE**

I authorize the Girls' Service League, Inc. to verify the information provided on this form for the purpose of processing my scholarship application for consideration of an undergraduate degree award. In signing this document, I also acknowledge that I have read the application in its entirety and understand that my application will be rejected if all required information and documents are not supplied by the due date of **Thursday, January 16, 2020**

**Signature and date are required**

Print full name of applicant	Print name of parent or guardian
Signature of applicant _____	Date: ____/____/____
Signature of parent or guardian _____	Date: ____/____/____