



**APPLICANT PROFILE**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: \_\_\_\_\_  
Home Address: \_\_\_\_\_, Pharr, Texas 78577  
Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Email: \_\_\_\_\_

**HIGH SCHOOL**

Name of High School attending: \_\_\_\_\_ City: \_\_\_\_\_  
Cumulative Grade Point Average (GPA): \_\_\_\_\_ (On a 4.0 Scale)  
Are you receiving or will you receive dual enrollment credits/certificates/degrees?  Yes  No  
If yes, how many credits/list certificates or degrees: \_\_\_\_\_  
\*Attach transcripts as proof of GPA, dual enrollment credits or certificates  
Are you the first person in your family to attend college:  Yes  No

**AWARDS / EXTRA CURRICULAR ACTIVITIES**

Feel free to attach a resume or activity sheet. If you do so, you may skip to Question #7  Resume attached  
A. List any academic honors, awards, leadership activities, hobbies, outside interests, extracurricular activities, and school related volunteer activities while in high school:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**POST SECONDARY EDUCATION**

Have you decided what institution of higher learning (i.e., university college, trades school, vocational school, etc.) you will be attending? If so, list school name and location: \_\_\_\_\_  
If not, please list top 3 schools and their location:  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

Have you been accepted?  Yes  No What is your planned field of study/major: \_\_\_\_\_

**HOUSEHOLD**

List Family Gross Annual income from your most recent 2020 or 2021 Federal income Tax Form 1040 (Line #22)  
Gross Income \$ \_\_\_\_\_ Household Size: \_\_\_\_\_  
Have you filed the Free Application for Federal Student Aid (FAFSA) form?  Yes  No  
Do you anticipate receiving financial assistance/scholarships from any other sources? \_\_\_\_\_  
Name & address of parent(s) or legal guardian(s) (Include address if different from your own listed in Q2).  
Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Work Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_

## ESSAY

On a separate sheet please type an essay / personal statement (250-500 words) responding to the statement below:

Describe how volunteer or community service has shaped who you are today and what community service has taught you. Also, discuss any challenges or obstacles you have experienced and overcome and how this will help you succeed in college and beyond.

## STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship recipient my picture may be taken and used to promote the PEDC Foundation's Scholarship Program. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship recipient, according to Pharr EDC Foundation Scholarship policy, I must be present at any potential awards ceremony, or reception on April 2022 to receive my scholarship award.

I hereby understand that if chosen as a scholarship recipient, it is my responsibility, according to Pharr EDC Foundation Scholarship policy, to submit any and all requested information to the Foundation in order for my scholarship to be processed and paid in a timely manner.

I hereby understand that I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of Scholarship Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

## STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR

I hereby affirm that this application meets the criteria set forth by this scholarship program and that I support this application to Pharr EDC Foundation.

Name of Guidance Counselor: \_\_\_\_\_ High School: \_\_\_\_\_

Contact Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Contact Email: \_\_\_\_\_

Signature of Guidance Counselor: \_\_\_\_\_ Date: \_\_\_\_\_

## CHECKLIST (Make sure to include all required supporting information. Incomplete packages will be rejected)

Application  Essay  Resume/Activity Sheet  Guidance Counselor Signature  High School Transcript

## READY TO SUBMIT

**Email** – Send complete scholarship packet in **PDF** format to [pharredcfoundation@pharr-tx.gov](mailto:pharredcfoundation@pharr-tx.gov)

**Mail** – Send complete scholarship packet Attention: Pharr EDC Foundation 1215 S. Cage Blvd., Pharr, TX 78577

**DEADLINE:** This application must be received by the Pharr EDC Foundation's Office by: **March 14, 2022 at 5:00pm**

The Pharr EDC Foundation does not discriminate in its selection of scholarships on the basis of race, color, religion, sex (including pregnancy and gender identity, national origin, political affiliation, sexual orientation, marital status, disability, genetic information, age, membership in an employee organization, retaliation, parental status, military service, or other non-merit factor.