

## Association of Texas Leaders for Education Scholarship

### The Community Foundation of West Texas

The Community Foundation of West Texas, formerly known as the Lubbock Area Foundation, Inc., is an independent, non-profit, publicly supported, tax-exempt organization whose purpose is to help donors meet the existing and future needs of the area's educational, health, cultural, civic and charitable organizations. The Foundation's mission goes beyond social service and welfare; our donors are improving the overall quality of life in the South Plains area.

The Foundation administers a variety of charitable funds, including scholarships to assist students with post-secondary educational expenses. The Foundation is pleased to administer the *Association of Texas Leaders for Education Scholarship*, which is described below.

### Purpose:

This scholarship was established by the Association of Texas Leaders for Education (ATLE) for Texas resident graduating seniors who will be attending a Texas school to pursue a secondary education. The purpose for this scholarship is to promote higher education for Texas students. The total amount will be \$1,000.00.

### Eligibility Requirements:

Without discrimination toward race or sex, the following eligibility requirements shall apply to candidates for the ATLE Scholarship:

- ❖ Graduating Senior
- ❖ A 3.5 or higher GPA
- ❖ Financial need may be considered
- ❖ Demonstrated service to community and to school
- ❖ Intent to enroll as a full-time student (at least 12 credit hours) at an accredited college, university or technical school in Texas during the fall semester following graduation from high school with the intent of receiving a degree.
- ❖ Positive personal school and community references
  - 1 from a teacher or school personnel
  - 1 from a community volunteer reference

### Selection Process:

- ❖ The Scholarship Advisory Committee will review completed applications and make recommendations to the Community Foundation of West Texas Board of Directors, which will make the final decision on the scholarship awards.
- ❖ Incomplete applications will not be considered.
- ❖ The recipient will be announced by April 30.

### **Scholarship Fund Disbursement:**

- ❖ Scholarships will be awarded based on the availability of funds, and may be used for tuition, fees and required books.
- ❖ Scholarships will be paid to the school, and not directly to the recipient.
- ❖ All unused funds must be returned to the Community Foundation of West Texas.

### **Application Requirements:**

All scholarship applications must be completed in full and submitted by **March 15**.

- ❖ Completed Application Form
- ❖ Typed Personal Essay
- ❖ High School Transcript
- ❖ 2 Letters of Recommendation from the student's high school faculty and community volunteer staff

Applications should be sent to:

**ATLE Scholarship Fund  
Attn: Denise Oviedo  
Community Foundation of West Texas  
6102 82<sup>nd</sup> Street 8B  
Lubbock, TX 79424**

**\*Please do not send the first two pages in with your completed application.**

# Association of Texas Leaders for Education Scholarship

Date to begin school: \_\_\_\_\_

## GENERAL INFORMATION – (Please type or print)

Mr. \_\_\_\_\_ Ms. \_\_\_\_\_ Full Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Social Security Number (last 4 digits): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Student's Father (if applicable): \_\_\_\_\_  
*(If father is deceased, please indicate)*

Father's Home Address: \_\_\_\_\_

Name of Student's Mother (if applicable): \_\_\_\_\_  
*(If mother is deceased, please indicate)*

Mother's Home Address: \_\_\_\_\_

## EDUCATIONAL PLANNING:

College or Universities to which you have applied:

1. \_\_\_\_\_ Accepted: \_\_\_Y\_\_\_N Attending: \_\_\_Y\_\_\_N

2. \_\_\_\_\_ Accepted: \_\_\_Y\_\_\_N Attending: \_\_\_Y\_\_\_N

Intended Major: \_\_\_\_\_

What career are you planning to pursue? \_\_\_\_\_

## EDUCATIONAL BACKGROUND:

Current GPA (3.5 MIN; 7 high-school semesters): \_\_\_\_\_ Is this a weighted average? \_\_\_Y\_\_\_N

Class Rank: \_\_\_\_\_ out of \_\_\_\_\_ High School: \_\_\_\_\_

SAT Scores: Verbal \_\_\_\_\_ Math/Writing \_\_\_\_\_ Date Taken: \_\_\_\_\_

ACT Composite: \_\_\_\_\_ Date Taken: \_\_\_\_\_

**OTHER STUDENT INFORMATION**

**Extracurricular Activities:**

Please list your extracurricular activities in and out of school (for example sports (9-12), band (9-10), NHS (11-12), student council (9-12), Scouts (9-12), church youth group (10-12), etc.):

Activity	School grade(s) involved	Special Awards/Honors	Hours per week
	<input type="checkbox"/> 9 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 11 <sup>th</sup> <input type="checkbox"/> 12 <sup>th</sup>		
	<input type="checkbox"/> 9 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 11 <sup>th</sup> <input type="checkbox"/> 12 <sup>th</sup>		
	<input type="checkbox"/> 9 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 11 <sup>th</sup> <input type="checkbox"/> 12 <sup>th</sup>		
	<input type="checkbox"/> 9 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 11 <sup>th</sup> <input type="checkbox"/> 12 <sup>th</sup>		

**Volunteer & Community Service Activities:**

Please list volunteer and/or community service activities in which you have participated – use separate sheet in this format if needed (for example local food drives (9-12), tutoring others (11-12), Eagle Scout project (9-10), organization fundraising (9-12), etc.).

For this scholarship, we consider only volunteer activities which you initiated yourself. Do not list volunteer hours for class credit, NHS, regular church services or school/organization fundraising which is required.

Organization	School grade(s) involved	Activity
	<input type="checkbox"/> 9 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 11 <sup>th</sup> <input type="checkbox"/> 12 <sup>th</sup>	
	<input type="checkbox"/> 9 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 11 <sup>th</sup> <input type="checkbox"/> 12 <sup>th</sup>	
	<input type="checkbox"/> 9 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 11 <sup>th</sup> <input type="checkbox"/> 12 <sup>th</sup>	
	<input type="checkbox"/> 9 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 11 <sup>th</sup> <input type="checkbox"/> 12 <sup>th</sup>	

Please give the number of volunteer and/or community service hours served per year during high school:

Grade 9 \_\_\_\_\_                      Grade 11 \_\_\_\_\_  
 Grade 10 \_\_\_\_\_                      Grade 12 \_\_\_\_\_

Total Volunteer Hours Served in High School \_\_\_\_\_

**Work Experience:**

Please list any paid work experience you have outside of school:

Place of Employment	Hours Worked per Week

**Scholarship:**

Please list any scholarships received to date (name and amount of each)

Scholarship	Amount

**Unusual Financial Circumstances:**

If a student and/or his/her family have unusual financial circumstances please explain them below (ex: family member who has recently become unemployed, unusual medical expenses not covered by insurance; any other circumstances that affect income). Attach an additional page if necessary.

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**ADDITIONAL INFORMATION**

On two separate sheets of paper, please answer the following essay questions, limiting your responses to one page for each question. Personal essays must be typed.

**What caused you to choose the volunteer work that you have done? What have you learned or accomplished from this volunteer work?**

**“Besides financial need, why should you be chosen for this scholarship”**

**I hereby certify that the information I have provided in this application is accurate and complete to the best of my knowledge. I give the Community Foundation of West Texas permission to contact any of my teachers, counselors, or educational institutions to gain further information if needed. I understand that the information in this application will be shared with the scholarship selection committee.**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*\*Misrepresentation in any statement may be considered reason for cancellation and repayment of scholarship.*

**How did you hear about our scholarship?**

**School Counselor/Financial Aid Office:** \_\_\_\_\_

**Newspaper:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Other:** \_\_\_\_\_