Order of the Eastern Star Scholarship Texas City Chapter 626

Name:					
Address:					
Phone:	Number of people in family:				
Guardian 1 Name:		Relationshi	p:		
Occupation:	Employer:				
Guardian 2 Name:		Relationshi	p:		
Occupation:	Employer:				
High School:	GPA:	Class rank:	out of		
Extracurricular Activities: Please list years of involvement for each organization/club and any office held.					
Honors and Awards:					
Community Service: (Describe your community volunteer work)					

scholarship:	nterest, abilities and other personality traits) and why you should receive this
Additional information you would	like the committee to know or consider:	
Name of the college or university	that you plan on attending	
Course of study or major you plan	to study	
Financial Need: Indicate your fam	ily's adjusted gross income from last year's t	ax return.
Under \$15,000	\$15,000 - \$25,000	\$25,000 - \$35,000
\$35,000 - \$45,000	\$45,000 - \$55,000	\$55,000 - \$75,000
\$75,000 - \$90,000	\$90,000 - \$125,000	\$125,000+

Please attach a copy of your college acceptance letter.

You may attach a resume or other documents you wish to be considered with the application.

Completed application must be returned to Ms. Jones at <u>tljones@tcisd.org</u> by April 29, 2020