



SCHOLARSHIP



APPLICATION



HEART OF TEXAS SERTOMA CLUB

**FOR DEAF OR HARD-OF-HEARING HIGH SCHOOL SENIORS OR
EXISTING COLLEGE STUDENTS FOR ACADEMIC YEAR 20___ / 20___**

Please Check One - Applying For: ___ full 1 year scholarship ___ mid-term half year scholarship
(Deadline May 1st) (Deadline November 1st)

PERSONAL

Name _____ Date of Birth _____

Address _____

Phone (_____) _____ Email _____

Level of Hearing Loss (SRT & PTA) SRT Left Ear _____ dB Right Ear _____ dB

PTA Left Ear _____ dB Right Ear _____ dB

If applicant has a cochlear implant, please note CI in the above line

EDUCATION

Date entered (entering) college or university ____/____

CURRENT ___ High School ___ College/University Current Level _____

Name of Current School _____

Cumulative GPA (on an unweighted, 4.0 scale, as of completion of the most recent semester)

High School _____/4.0 Undergraduate _____/4.0

INTENDED COLLEGE OR UNIVERSITY INFORMATION *School the student will be attending or is currently attending on a full-time basis. If you have not determined a school or your application is pending, list your preferred school.*

If high school senior, do you have your acceptance letter from you intended school? _____

Intended College/University _____

Address _____

Phone (_____) _____ Contact Person If Any _____

Is this an online course of study or will you be attending physically _____

Anticipated date of graduation ____/____ Total credits required for degree _____

Estimated total credits during the academic period applying for including summer term(s) _____

Estimated cost of tuition/fees/books/supplies for the same academic period \$ _____

Please answer the following questions in the space provided – attachments will be discarded and the application not considered for the scholarship.

HONORS / AWARDS RECEIVED

COMMUNITY VOLUNTEER ACTIVITIES

INTERSCHOLASTIC ACTIVITIES

EXTRACURRICULAR ACTIVITIES (Include Jobs Held)

PERSONAL STATEMENT (300-500 words) – Explain how this scholarship will help to achieve your goals

By submitting this application, I have given permission to Sertoma to use my name and relevant information in all forms of publications, including, but not limited to print and web based.

Applicant Signature

Date