

Zonta Club of Seguin Memorial Scholarship Application

Please type or print the information requested:

Contact/Personal Information

1. Name _____
2. Permanent Address _____
County of Residence _____
City, State, and Zip _____
3. Telephone Number (home) _____ (work) _____ (cell) _____
4. Email _____
5. Date of Birth _____ 6. Married/Divorced/Single (circle one)
7. Do you have legal dependents that receive more than half of their support from you?
Yes ___ No ___
8. If yes, how many? _____
9. Are you the legal dependent of someone else? Who and what is the relationship?

10. Do you work? Where and how long? _____.
11. Please state your net (take home) income for the last two years:
Last Year _____ This Year _____
12. Please list any other additional income (from spouse or any other sources):
Last year _____ This Year _____

Educational History / Information

*PLEASE ENCLOSE A TRANSCRIPT

1. High School attended _____
Date of graduation _____ GED _____
Education completed beyond high school: _____

2. Are you currently attending an educational institution? _____

Name of institution _____ Academic Standing _____

3. If not currently enrolled, where do you plan to attend? _____

4. What is your classification? _____ Freshman _____ Sophomore

_____ Junior _____ Senior _____ Other

5. What is your enrollment status? _____ Full time _____ Part time

6. What is the degree, license, or certificate you will receive upon completion of your studies?

7. When do you expect to complete your degree/certificate? _____

In the space below or on a separate sheet, please explain why you should be awarded this scholarship:

References:

Please provide the name, address, and phone number of three references

who have known you for at least three years, excluding relatives:

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

I attest that all information provided by me, the applicant for this scholarship

is complete and accurate to the best of my knowledge.

Signature of applicant

Date

Upon completion of application, please return with transcript copy to:

Pat Grigg

Zonta Scholarship Committee

1821 Montclair

Seguin, Texas 78155