



**Deadline: 02/15/2021**

**by 4:15pm**

# Sharyland High School Local Scholarship Application

1216 N. Shary Rd.  
Mission, TX 78572  
Phone: (956) 580-5300

RETURN COMPLETED FORM TO GO CENTER STAFF.

**APPLICATIONS THAT ARE NOT COMPLETED WILL NOT BE CONSIDERED.**

Student Name: \_\_\_\_\_ I.D. #: \_\_\_\_\_

Address: \_\_\_\_\_

\*Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

\*Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Family's Financial Need: (check one)     Great                       Moderate                       Little

Estimated Combined Family Income (based on latest income tax information): \_\_\_\_\_

Mandatory: Please include 1<sup>st</sup> page of income tax. This page must include line 7 (Adjusted Gross Income)

**Plans After Graduation (Check One Only)**

\_\_\_\_\_ Academic College/University

\_\_\_\_\_ I plan to enlist in a Military Service.

1<sup>st</sup> Choice \_\_\_\_\_

\_\_\_\_\_ I plan to go straight to work.

2<sup>nd</sup> Choice \_\_\_\_\_

\_\_\_\_\_ I am not sure what my plans are after graduation.

What will your major be? \_\_\_\_\_

**List Activities, Awards, Community Service and Jobs Held**

**Freshman Year:**

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**Sophomore Year:**

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**Junior Year:**

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**Senior Year:**

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**Please answer the following questions**

**Where do you see yourself in ten years?**

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**What are your fears?**

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**What obstacles/problems have you experienced and how did you solve it?**

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**If you were granted one wish, what would it be and why? NOTE: You CANNOT ask for more wishes.**

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**What has been the nicest thing that you have ever done for somebody?**

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**How did you know what career you wanted to pursue?**

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**I \_\_\_\_\_ testify that the information provided on this application is true.**