

**WALKER COUNTY FAIR ASSOCIATION  
RODEO COMMITTEE  
SCHOLARSHIP APPLICATION**

DEADLINE FOR APPLICATION: **April 15, 2011**  
RETURN TO: **High School Career Center or post marked by  
the deadline and mailed to: 1300 11<sup>th</sup> Street,  
Suite 630, Huntsville, TX 77340**

**SCHOLARSHIP APPLICANTS MUST:**

**Applicants must be graduating seniors residing in Walker County; must have a minimum overall grade-point average of C (2.0 grade point average on a 4.0 system or equivalent); must have been accepted for admission to an accredited college, vocational school or other institution of higher learning; must have been a Walker County resident for the past two years; and must meet one of the following criteria:**

- 1. provide proof of being a member of a sanctioned Rodeo Association for two of the past four years; and/or**
- 2. have been an exhibitor in the Walker County Fair for at least two of the past four years.**

**To be considered, applications may be legibly hand-written and all required information must be returned to the school counselor's office before the specified deadline. Failure to follow these guidelines will cause your application to be disqualified. Applicants may be called for personal interviews before final selections are made.**

**Applications must obtain and return these items with this completed application:**

- 1. Current high school transcript showing grade point average.**
- 2. Recent color photograph.**
- 3. Copy of letter of acceptance from an accredited college, vocational school or other institution of higher learning.**
- 4. At least two recommendations from high school academic teachers, sealed in an envelope marked "CONFIDENTIAL".**
- 5. At least one letter of recommendation from an employer, former employer, or personal acquaintance, sealed in an envelope marked "CONFIDENTIAL".**
- 6. Application Essay.**

**THE WCFA RODEO SCHOLARSHIP COMMITTEE MAY OBTAIN INFORMATION FROM TEACHERS, 4-H CLUB, LEADERS AND/OR OTHER SOURCES.**

**FAMILY INFORMATION**

APPLICANTS FULL NAME: \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Home Telephone number: \_\_\_\_\_ Alternate phone number: \_\_\_\_\_

Parents Name: \_\_\_\_\_

(Father)

(Mother)

Parents Address if different from Applicant:

\_\_\_\_\_  
\_\_\_\_\_

Employment of:

Father: \_\_\_\_\_

(Company)

(Position)

Mother: \_\_\_\_\_

(Company)

(Position)

Number of older brothers/sisters: \_\_\_\_\_ List their ages: \_\_\_\_\_

Number of younger brothers/sisters: \_\_\_\_\_ List their ages: \_\_\_\_\_

Number of brothers/sisters attending college next year: \_\_\_\_\_

### FINANCIAL INFORMATION

List other scholarships for which applicant has been made; show amounts and whether or not they have been awarded.

List work experiences, showing dates, rates of pay, and description of duties.

List your Walker County Fair projects, activities, and awards (use an extra page if necessary).

Estimated cost of tuition and fees for first year of college: \$ \_\_\_\_\_

Complete the following estimated budget to indicate financial plans for the first year of attendance at college, vocational school, or other institution of higher learning:

- |   |          |
|---|----------|
| 1. Cash and savings available at start of college | \$ _____ |
| 2. Assistance from family                         | _____    |
| 3. Assistance from relatives or friends           | _____    |
| 4. From future summer earnings                    | _____    |
| 5. From other scholarships                        | _____    |
| 6. From other sources (specify below)             | _____    |

TOTAL ESTIMATED INCOME FOR FIRST YEAR \$ \_\_\_\_\_

We have examined this application and find it to be accurate and complete.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Vocational Instructor or County Agent

WCFA RODEO SCHOLARSHIP APPLICATION

STATEMENT OF UNDERSTANDING AND RESPONSIBILITIES

**(This copy to be turned in with application)**

If granted this scholarship, I pledge that I will:

- 1) Provide the WCFA at least one month before enrollment with the mailing address of the Financial Aid Office of the institution I will attend; as well as proof of registration and class schedule.
- 2) Furnish a copy of the following; immediately upon receipt, to the WCFA:
  - a. Any interim grade deficiency report;
  - b. Grade reports received at the end of the each semester for which this scholarship is in effect (Due within two weeks of receiving grades).
- 3) Keep the WCFA advised of any changes of address or telephone number.

I understand that half of the scholarship funds will be deposited with the Financial Aid Office of the institution in which I am to be enrolled for the first semester of the Fall or Spring Term and that a copy of my grades must be furnished to the WCFA before funds are advanced for the second semester.

I understand that communications pertaining to the scholarship after it is awarded are to be mailed to WCFA, P.O. Box 1817, Huntsville, TX 77342.

I understand that the WCFA Rodeo Scholarship Committee reserves the right to withdraw this scholarship, or any unfunded portion of it, for the following reasons:

- a. If the applicant is enrolled for fewer than 12 semester hours.
- b. If the applicant withdraws from the institution.
- c. If the applicant's grade reports are not submitted in a timely manner.
- d. If the applicant's grade-point average for the first semester is below a 2.0 on a 4.0 scale or equivalent.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian

WCFA RODEO SCHOLARSHIP APPLICATION

STATEMENT OF UNDERSTANDING AND RESPONSIBILITIES

**(This copy to be retained by applicant)**

If granted this scholarship, I pledge that I will:

- 1) Provide the WCFA at least one month before enrollment with the mailing address of the Financial Aid Office of the institution I will attend; as well as proof of registration and class schedule.
- 2) Furnish a copy of the following; immediately upon receipt, to the WCFA:
  - a. Any interim grade deficiency report;
  - b. Grade reports received at the end of the each semester for which this scholarship is in effect (Due within two weeks of receiving grades).
- 3) Keep the WCFA advised of any changes of address or telephone number.

I understand that half of the scholarship funds will be deposited with the Financial Aid Office of the institution in which I am to be enrolled for the first semester of the Fall or Spring Term and that a copy of my grades must be furnished to the WCFA before funds are advanced for the second semester.

I understand that communications pertaining to the scholarship after it is awarded are to be mailed to WCFA, P.O. Box 1817, Huntsville, TX 77342.

I understand that the WCFA Rodeo Scholarship Committee reserves the right to withdraw this scholarship, or any unfunded portion of it, for the following reasons:

- a. If the applicant is enrolled for fewer than 12 semester hours.
- b. If the applicant withdraws from the institution.
- c. If the applicant's grade reports are not submitted in a timely manner.
- d. If the applicant's grade-point average for the first semester is below a 2.0 on a 4.0 scale or equivalent.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian

WCFA RODEO COMMITTEE SCHOLARSHIP  
ACADEMIC TEACHER RECOMMENDATION

THIS FORM IS TO BE SEALED IN AN ENVELOPE MARKED “**CONFIDENTIAL**”  
AND RETURNED TO THE APPLICANT:

Student’s Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Does this student have the ability, desire, and motivation for education beyond the high school level, and do you think this student is deserving of a scholarship? Please include other comments you believe to be pertinent to this student’s application for scholarship funds.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Signature of Teacher

THIS FORM IS TO BE SEALED IN AN ENVELOPE MARKED “**CONFIDENTIAL**”  
AND RETURNED TO THE APPLICANT.

WCFA RODEO COMMITTEE SCHOLARSHIP  
ACADEMIC TEACHER RECOMMENDATION

THIS FORM IS TO BE SEALED IN AN ENVELOPE MARKED “**CONFIDENTIAL**”  
AND RETURNED TO THE APPLICANT:

Student’s Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Does this student have the ability, desire, and motivation for education beyond the high school level, and do you think this student is deserving of a scholarship? Please include other comments you believe to be pertinent to this student’s application for scholarship funds.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Signature of Teacher

THIS FORM IS TO BE SEALED IN AN ENVELOPE MARKED “**CONFIDENTIAL**”  
AND RETURNED TO THE APPLICANT.

WCFA RODEO COMMITTEE SCHOLARSHIP  
APPLICANT ESSAY

In your own handwriting, list your future goals and career plans in the space provided below.