## Scholarship Application

Stephanie Austin Scholar Athlete

Arlington High School

**Stephanie Austin Scholar Athlete Memorial Scholarship**

 **Stephanie Austin was a caring and generous woman. She was a loving friend, mentor, mother, grandmother, and wife. Her dedication has impacted the lives of a countless number of people. She attended many sporting events, plays, and performances in her 30 some years of dedication to Arlington High School. Stephanie was a strong supporter of academics and athletics often welcoming these students into her home. It was her belief that a child’s future was directly dependent on the quality of education they receive. She knew the teachers, coaches, and faculty at Arlington High School mold the future leaders of the world every day.**

 **Stephanie Austin’s family and friends would like to honor her commitment to Arlington High School by presenting a Colt senior with a scholarship in her honor. We would like the applicants to write an essay explaining how their efforts at Arlington High School have mirrored Stephanie’s love of academics, athletics, and Arlington High School. Applicants should also complete the attached application, two letters of reference, and your personal essay. Please bring applications to Alan Austin in D105 4-24-2025.**

 **Alan Austin**

**General Information:** (please type or print)

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_\_\_\_

# Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Male \_\_\_\_\_\_ Female \_\_\_\_\_\_

Please provide any information you would like the committee to consider regarding your financial need.

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**High School Academic Profile:**

SAT: Verbal \_\_\_\_\_ Math \_\_\_\_\_ Total \_\_\_\_ ACT Composite \_\_\_\_\_\_\_

Number in your class \_\_\_\_\_\_\_ Rank in your class \_\_\_\_\_\_\_ GPA \_\_\_\_\_\_\_

I understand that if I am selected to receive a scholarship, my final approval is contingent upon the completion of my high school requirements by the time of commencement of my graduating year. If I do not meet this requirement, I relinquish any right to the scholarship. I also understand that I must be enrolled in college no later than the fall semester following my high school graduation or I forfeit the scholarship.

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Signature of Applicant Date Signature of Parent/Guardian Date

**Educational Plans:**

What are your top three choices of college?

#1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#3\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Employment Information:**

Number of hours worked per week during school \_\_\_\_\_\_\_\_\_ summer\_\_\_\_\_\_\_\_.

Do you plan to be employed during college? Why or why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Please list your employment record for the last four years. If you have not been employed, please explain.

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| Place | Position | Date (month/year) |
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**High School Organizations/Activities:**

Please list all high school organization/activities in which you have been involved. Include honors/awards

received, offices held and amount of time spent (daily/weekly/monthly/one time only, etc.)

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**Community/Church Activities:**

Please list all community and church activities in which you have been involved. Include volunteer activities, honors/awards received, offices held, and amount of time spent (daily/weekly/monthly/one time only, etc).

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 Please return the application, two letters of reference, and your personal essay by 4-24-2025 to Alan Austin in D105.