

# **Parmer County Cancer Coalition General Scholarship**

**Sponsor:** Parmer County Cancer Coalition

**Deadline:** April 1<sup>st</sup>

**Maximum Award:** \$2,000

This scholarship will be split in two payments. \$1,000 will be awarded for the fall semester and the other \$1,000 will be awarded for the spring semester, as long as an enrollment schedule is shown as proof that the student is continuing their education.

**Purpose:** To allow any High school seniors and entering college students in Parmer County, Texas to receive financial aid assistance in obtaining a college education.

One student from each independent school district in Parmer County (Friona, Bovina, Farwell, & Lazbuddie) will be selected by the scholarship committee.

This scholarship is a competitive scholarship where all requirements are to be met to be considered.

## **Eligibility:**

- Application for scholarship must be submitted by the student him/herself, including a photograph of the applicant.
- You must be a graduating high school senior or entering college freshman.
- You must fill out the application attached.
- You must have a minimum GPA of 2.5, attach transcript to application.
- You must complete the attached three short answer questions.
- You must show proof that FAFSA is complete, attach a copy of the Student Aid Report(SAR)
- Exceptions to certain requirements may be made by the Parmer County Cancer Coalition Scholarship Committee.

## **Return application:**

### **By Mail:**

Parmer County Cancer Coalition  
PO BOX 222  
Friona, TX 79035

### **Drop off:**

Counselor's Office  
or  
Kendrick Oil Co.  
801 S. Main St.  
Friona, TX 79035  
Office: Magali Morales

**1. What are your plans and goals for after high school?**

[illegible]

**2. Tell us about a personal achievement you are proud of?**

[illegible]

**3. How will this Scholarship make a difference for you?**

[illegible]



# Parmer County Cancer Coalition

## General Scholarship



**Student's Name:** \_\_\_\_\_  
Last First Middle

**Address:** \_\_\_\_\_  
Mailing Address City State Zip

**Telephone:** (     ) \_\_\_\_\_

**Father/Guardian:** \_\_\_\_\_

**Mother/Guardian:** \_\_\_\_\_

**Cumulative GPA:** \_\_\_\_\_ **Class Rank:** \_\_\_\_\_ in a class of \_\_\_\_\_

**ACT or SAT Composite Score:** \_\_\_\_\_

**Please list extracurricular school activities or organizations to which you belong, including any outside of school, and community service projects you may have participated in.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date