McCulloch County General Scholarship Application

Please use this application for all local scholarships that accept the McCulloch County General Scholarship Application.

Scholarship Name

_____

Applicant's Information

Senior's Name _____

High School Attended: ___Brady HS   ___Lohn HS   ___Rochelle HS

Senior's Mailing Address _____
City_____ Zip Code_____

Phone Number _____

Email Address _____

Family Information

Parent/Guardian's Name _____
Occupation:_____

Parent/Guardian's Name:_____
Occupation:_____

If you have siblings, please provide the following information

Name of Sibling	Age	School Attending	Will This Sibling Also Be in College Next Year?
			__Yes ___No
			__Yes ___No
			__Yes ___No
			__Yes ___No

Work Experience

Please provide any work experience while you have been in high school. If you have not worked, you can leave this section blank.

Name of Employer	Position	Hours per Week	Special Skills Developed As Part of Your Job

Postsecondary Plans

Select the type of postsecondary option you plan to pursue after high school

__Certificate   __Associate's Degree   __Bachelor's Degree

Names and Location of Postsecondary Institution You Have Chosen to Attend

School Name_____

Location _____

Type of Postsecondary Institution ___Trade School ___Community College ___University

Proof of Acceptance Can Be Provided ___Yes ___No

Intended Major or Program_____

Types of Financial Aid for Which You Have Applied or Are Eligible to Receive

___FAFSA submitted

___University-Specific Aid

___Other Outside Scholarships

___GI Bill Benefits

___Other_____

Estimated Amount of Total Aid for 2025-26 (if you have that information at this time)

_____

High School Information

Name of High School_____

Class Rank #_____ of _____students

Cumulative GPA_____

Test Scores (if taken)   Composite ACT Score_____   Combined SAT Score_____

Dual Credit Hours Earned (if any)_____hours

Types of Dual Credit Courses (check all that apply)

___English ___Math ___Social Studies ___Science ___CTE ____Other

Industry Based Certifications Earned (if any)

___Welding ___Culinary ___Microsoft ___CNA

Extracurricular Activities

Name of Club/Activity/Organization	Leadership Roles (if any)	Years of Participation	Awards or Honors as Part of This Activity
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	
		__9 __10 __11 ___12	

Community Involvement/Volunteerism

Name of Organization/Project/Club	Leadership Roles (if any)	Estimated Hours Involved	Description (Provide any additional details to help us understand your involvement/role)

Special Skills/Talents/Hobbies

If there is something unique about you that does not fit neatly into one of the categories above, please use the space below to list and/or describe them.

Other Information

Use the space below to provide the committee with any other information that would be helpful to the scholarship committee members to know about you when reviewing your application, such as extenuating family circumstances, obstacles/hurdles you have overcome, etc.

Be sure to include any additional items required for this scholarship as per the scholarship checklist.

Statement of Accuracy/Understanding/Responsibilities

- I hereby attest that the information provided in this application is true and correct.
- I understand that I am solely responsible for knowing scholarship requirements, completeness and quality of my application.
- I understand I will not be given an opportunity to add additional information/documentation after the scholarship deadline.
- I am aware I must provide proof of enrollment in colleges classes (if required) if this is a one-time award, or annually provide proof of enrollment in college classes and/or college grades (if required) if this is a renewable award.
- I authorize use of the information contained on this application by the organization sponsoring the scholarship.
- I also understand that all scholarship committees' decisions are final.

Signature of Applicant_____

Date_____

Signature of Parent_____

Date_____