

Scholarship Application 2025

McLaughlin Doty Foundation

Introduction

INTRODUCTION TO THE BOARD*

Please submit an introduction to the Foundation Board of Directors telling us about yourself, including a description of why you have selected the applicable educational institution; your proposed major, educational goals, and career goals; and a statement of financial need or hardship requiring the scholarship or any special circumstances of which the Board should be aware.

Character Limit: 3000

Student Information

Project Name*

Please enter your last name followed by your first initial and the year you are graduating from high school in the form **Last Name, First Initial - Graduation Year**.

For example: John Doe graduating in 2025 would be Doe, J - 2025

Character Limit: 100

BIRTH DATE*

Character Limit: 10

GENDER*

Choices

Male

Female

Prefer not to answer

RACE/ETHNIC BACKGROUND (optional)

Choices

American Indian or Alaska Native

Asian

Black or African American

Hispanic or Latino

Native Hawaiian or other Pacific Islander

White (not of Hispanic or Latino origin)

Two or more races

Other

Parent/Guardian Information

MOTHER'S NAME*

Character Limit: 250

MOTHER'S OCCUPATION AND EMPLOYER*

Please include the name of the business if applicable.

Character Limit: 250

MOTHER'S EDUCATION*

Please select your mother's highest level of education.

Choices

- No School
- Elementary School
- Middle School
- Some High School
- High School Graduate
- Some College
- Associate's Degree
- Bachelor's Degree
- Master's Degree
- Doctorate
- Professional Degree
- Unknown

FATHER'S NAME*

Character Limit: 250

FATHER'S OCCUPATION AND EMPLOYER*

Please include the name of the business if applicable.

Character Limit: 250

FATHER'S EDUCATION*

Please select your father's highest level of education.

Choices

- No School
- Elementary School
- Middle School
- Some High School
- High School Graduate
- Some College
- Associate's Degree
- Bachelor's Degree
- Master's Degree
- Doctorate

Professional Degree
Unknown

GUARDIAN'S NAME

Only enter this information if it is applicable to your situation.

Character Limit: 250

GUARDIAN'S OCCUPATION AND EMPLOYER

Character Limit: 250

GUARDIAN'S RELATIONSHIP TO YOU

For example: Is your guardian an aunt, uncle, grandparent, foster parent, etc.?

Character Limit: 250

FAMILY/HOUSEHOLD*

Briefly describe your family/household or living situation. *(For example: Do you live with both parents or a single parent? Do you have siblings? Are there other people or family members besides your immediate family living in your house?)*

Character Limit: 3000

FAMILY IN COLLEGE*

Number of family members who will be in college in the fall of 2025 (including yourself)

Character Limit: 250

Educational Information - High School

HIGH SCHOOL*

Choices

- Tivy High School
- Ingram Tom Moore High School
- Center Point High School
- Harper High School
- Our Lady of the Hills High School
- Hill Country High School
- Home School (please see below)
- Other (please see below)

If you selected "HOMESCHOOL" or "OTHER" above, please list the name and address of your high school or the name of the accredited homeschool program.

Character Limit: 250

GUIDANCE COUNSELOR*

Please list name, email address, and phone number.

Character Limit: 250

CUMULATIVE GPA*

Character Limit: 50

CLASS RANK*

Please include your class rank and the number of students in your class. For example: 1 of 250. If your high school does not rank students, please write non-ranking school.

Character Limit: 250

SAT SCORE

If you did not take the SAT, please leave this question blank.

Character Limit: 250

ACT SCORE

If you did not take the ACT, please leave this question blank.

Character Limit: 250

COLLEGE CREDITS*

Please list the number of college credits/hours you will be graduating from high school with.

Character Limit: 3

ASSOCIATE'S DEGREE*

Will you also be receiving your associate's degree upon graduation from high school?

Choices

Yes

No

Educational Information - College

COLLEGE OR EDUCATIONAL FACILITY YOU PLAN TO ATTEND*

Character Limit: 250

INTENDED DEGREE PLAN OR MAJOR (and minor, if applicable)*

Character Limit: 250

HAVE YOU BEEN ACCEPTED TO THIS SCHOOL?***Choices**

Yes

No

If you have not received an acceptance letter from the college or educational facility you plan to attend, please list all schools you have applied to and the date(s) you anticipate receiving notification of your acceptance. Please indicate which school is your second choice if you do not receive acceptance to your preferred school listed above.

Character Limit: 500

DO YOU INTEND TO ATTEND SCHOOL FULL-TIME OR PART-TIME?*

Recipients of the McLaughlin Doty Foundation Scholarship are required to be enrolled as full-time students.

Choices

Full-time student
Part-time student

ANTICIPATED COLLEGE COMPLETION*

How long do you anticipate it will take you to complete your degree?

Choices

more than 4 years
4 years
3 years
2 years
1 year
less than 1 year

ARE YOU A FIRST GENERATION COLLEGE STUDENT?*

Being a first generation student means that neither of your parents completed a 4-year college or university degree.

Choices

Yes
No

Financial/FAFSA Information

YOUR FAMILY'S ANNUAL HOUSEHOLD INCOME*

Please choose a range.

Choices

less than \$35,000
\$35,001-\$55,000
\$55,001-\$75,000
\$75,001-\$100,000
\$100,001-\$150,000
\$150,001-\$200,000

over \$200,000

HAVE YOU COMPLETED THE FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA)?*

If the answer is "NO" please skip to the next section. (*We encourage all eligible students to complete the FAFSA.*)

Choices

Yes

No

I am not eligible to complete the FAFSA (please see the next question)

TASFA

If you are not eligible to complete the FAFSA, have you completed or do you plan to complete the TASFA (Texas Application for State Financial Aid)?

Choices

Yes

No

STUDENT AID INDEX (SAI)

Please list your Student Aid Index (SAI) as reported in your FAFSA Submission Summary (FSS). Your SAI can be found on your FSS under the "Eligibility Overview" tab.

Character Limit: 20

PELL GRANT

According to your FAFSA Submission Summary (FSS), are you eligible to receive a Pell Grant?

Choices

Yes

No

PELL AMOUNT

If you answered "YES" to the previous question, please list the amount of the Pell Grant you are eligible to receive.

Character Limit: 20

If you feel like your FAFSA doesn't accurately reflect your family's current financial situation, please give a brief explanation why.

Character Limit: 1000

Expenses & Other Financial Assistance

PART A: COST OF ATTENDANCE*

Please enter the most recent Cost of Attendance for the school you plan on attending or for your top-choice school. This information is readily available on your school's website if you search Cost of Attendance. Please enter the TOTAL average cost before aid. (This amount should generally include all tuition and fees, books and supplies, room and board, and other expenses.)

**You will also need to attach a copy of the Cost of Attendance breakdown at the end of your application.*

TOTAL PART A:

Character Limit: 20

PART B: FINANCIAL ASSISTANCE

Please list all financial assistance you will receive to assist in paying for your educational expenses. This includes all federal grants such as Pell or SEOG; scholarships and grants offered by private organizations and/or your educational institution; athletic scholarships; military benefits; and any other college savings you may have.

If you are not receiving any additional financial assistance, please enter 0 in Column (4) for Total Amount.

For each item enter:

- (1) The name of the scholarship, grant, or the source of the funding;**
- (2) The type of financial assistance;**
- (3) The purpose, conditions, or time period of the funding (For example: 1 time scholarship for books only or \$2000/year educational scholarship for 4 years);**
- (4) Total amount of funding received for the 2025-26 academic year. (For example: enter a \$20,000 total scholarship paid over 4 years as \$5000.)**

	(1) Name of Scholarship, Grant or Source of Funding	(2) Type of Financial Assistance	(3) Purpose (for ex: 1 time for books)	(4) Total Amount (for 2025-26)
1				
2				

3				
4				
5				
6				
TOTAL PART B:				

TOTAL AMOUNT OF FUNDS NEEDED*

Please subtract the Total from **Part B** above from the Total from **Part A** above.

For Example:

Total Part A (Total Cost of Attendance): \$50,000
- Total Part B (Total Financial Assistance): - \$10,000
Total Amount of Funds Needed 2025-26: \$40,000

Character Limit: 20

REMAINDER OF FUNDS*

Based on the Total Amount of Funds Needed above, how much money does your family expect to be able to contribute to your education next school year? Please provide an honest amount. *This does NOT have to match the FAFSA amount.*

Character Limit: 20

PART C: OTHER FINANCIAL ASSISTANCE

Please list any other significant scholarships, grants, or financial assistance you have applied for to assist in paying for your educational expenses (only list if the total amount of the grant or scholarship is over \$1000).

Please indicate next to each item:

- (1) The name of the scholarship, grant, or other financial assistance;*
- (2) The amount of the scholarship, grant, or money requested; and*
- (3) The approximate date you expect to receive notification of approval or denial of your application.*

Character Limit: 1000

Activities and Awards

EXTRACURRICULAR ACTIVITIES AND COMMUNITY SERVICE*

Please list the extracurricular and community service activities in which you have participated (*with a meaningful contribution of your time*) while in high school. Please include a description including general time commitment, dates involved, and any leadership roles you may have held.

Character Limit: 5000

AWARDS AND HONORS

Please list all *significant* awards and honors you have received.

Character Limit: 5000

Work Experience

ARE YOU CURRENTLY EMPLOYED?*

Choices

Yes

No

CAREER PREPARATION/WORK-STUDY

If you answered Yes to the previous question, is your employment part of a career preparation class or work-study program through your high school?

Choices

Yes

No

CURRENT EMPLOYER INFORMATION

Please list the company name and the name of your supervisor.

Character Limit: 250

NUMBER OF HOURS WORKED (if applicable)

Please indicate the number of hours you work at your current job, whether weekly, monthly, etc.

Character Limit: 250

INCOME (if applicable)

Please list your income from your current job.

Character Limit: 20

PREVIOUS OR OTHER WORK EXPERIENCE

Please list any other work experience you may have had in the past.

Character Limit: 1000

DO YOU INTEND TO WORK WHILE IN SCHOOL?*

*Please keep in mind that all recipients of the McLaughlin Doty Foundation Scholarship are required to maintain **at least part-time employment** while receiving the scholarship.*

Choices

Yes

No

Top Ten

Top Ten List*

Please include a list of 10 things about you that aren't otherwise included in your application.

Please number your list and include a short paragraph for each item. Be sure to proofread your list and double-check for any grammatical or spelling errors. All responses should be your original work and written in your own voice.

For example: Tell us about how you spend time outside of school; greatest experiences; people who have influenced you; your bucket list items; greatest lessons you've learned; goals you have accomplished; things you hope to achieve; dreams and aspirations; what or who inspires you; how your family or community background has influenced you; trials, tribulations, or hardships you have endured; quirks that make you who you are; greatest gift you have received; interesting hobbies; etc. These are merely examples. You may be creative and write about anything you think is important and would help us get to know you better as long as there are 10 separate, distinct items.

Character Limit: 10000

Attachments

Note: If you have multiple pages please combine them into one file by using a scanner or other tool before uploading into each file upload below.

ACCEPTANCE LETTER

Please attach proof of your acceptance to or enrollment in the educational facility for which funds are requested. *If you have not received an acceptance letter by the time you submit your application, please notate that in your application and provide a copy as soon as it is received.*

File Size Limit: 2 MB

TRANSCRIPT*

Please attach a the most recent copy of your high school transcript showing cumulative GPA and class rank (if applicable) for all years of attendance.

File Size Limit: 2 MB

COST OF ATTENDANCE*

Please submit a copy of the detailed cost of attendance for the school you plan to attend. (This should show the cost breakdown by tuition and fees; books; room and board; and any other expenses.)

File Size Limit: 2 MB

FINANCIAL AID AWARD LETTER

If you have received a financial aid offer or award letter from your school, please upload that document here. If you have not received a financial aid offer letter yet, you may upload a copy of your FAFSA Submission Summary.

File Size Limit: 2 MB

Electronic Signature

PLEASE SIGN BELOW:*

I give my permission to contact school counselors, teachers, employers, and other references to discuss my academic and personal performance. I acknowledge that the information in this application is true and accurate and that all work is my own, original work.

Character Limit: 250

PARENT'S OR GUARDIAN'S SIGNATURE

Only required if the applicant is less than 18 years of age or incapacitated.

Character Limit: 250

DATE*

Character Limit: 10