

HOUSTON CLAIMS ASSOCIATION SCHOLARSHIP APPLICATION

REQUIREMENTS FOR APPLICATION:

Parent/guardian must have been an HCA member one (1) year prior to application deadline, must have attended at least four (4) meetings within the year, and membership must be current.

The applicant must:

1. Have been accepted by or currently enrolled in an accredited college, university or vocational/technical school.
2. Be financially dependent on parent/guardian.
3. Be less than 25 years of age at the beginning of the scholastic year (September 1).

ATTACHMENTS: All required documents or an explanation **must** accompany the application form. Failure to do so disqualifies the applicant.

1. Copy of applicant's high school or college transcript.
2. Copy of applicant's letter of acceptance, if available.
3. Copy of any awards, recommendations or documents which applicant feels will assist the selection committee.
4. Current photograph.

NAME _____ Student ID or SS# _____

ADDRESS _____
(Street, City, State, Zip)

TELEPHONE _____
(Home) _____ (Cell) _____

E-MAIL ADDRESS _____

DATE OF BIRTH _____

PARENT/GUARDIAN WHO IS A MEMBER OF HOUSTON CLAIMS ASSOCIATION

PARENT/GUARDIAN EMPLOYER AND POSITION _____

BUSINESS PHONE _____ E-MAIL _____

HIGH SCHOOL ATTENDED _____

DATE OF GRADUATION _____

NAME/TELEPHONE # OF COUNSELOR _____

INSTITUTION TO BE ATTENDED _____

IF CURRENTLY ENROLLED:

NAME OF INSTITUTION _____

LAST SEMESTER ATTENDED _____

EXTRA CURRICULAR ACTIVITIES _____

OFFICES OF LEADERSHIP POSITION HELD _____

WORK EXPERIENCE _____

SAT/ACT SCORES _____ WHEN TAKEN _____

MAJOR STUDY INTEREST _____

MINOR STUDY INTEREST _____

DO YOU HOLD OR HAVE YOU APPLIED FOR ANY OTHER SCHOLARSHIP OR ASSISTANCE?

WHAT _____ WHERE _____

RESULTS _____

State briefly why you applied for this scholarship, why you feel you should receive it and what you want to achieve with it. List any other information which you feel will be important to the selection committee. You may use an additional page if necessary.
