

**2024 Application Deadlines:**

Phase 1- 4/30/24, Phase 2- 7/8/24, Phase 3- 9/30/24

Postmarked by: \_\_\_\_/\_\_\_\_/2024

**OFFICE USE ONLY**

Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_

Completed by school: Yes/No

**The Salvation Army  
Kenneth Hill Foundation Adult Education Program**111 N. Baker Street  
Granbury, Texas 76048**Scholarship: 254-651-6251****Website: tsatx.org/hcadulteducation****APPLICATION****For the Salvation Army Office use Only**

\_\_\_\_ Applicant ID #; Date of ALL materials received: \_\_\_\_\_  
\_\_\_\_ Application Completed with Applicant's signatures \_\_\_\_\_  
\_\_\_\_ Copy of Driver's License/ State ID \_\_\_\_\_  
\_\_\_\_ Two Reference Forms (Sent directly from References); Dates received \_\_\_\_\_  
\_\_\_\_ Financial Aid Form completed by School/Program; Date received \_\_\_\_\_  
\_\_\_\_ Official High School/GED/post-secondary education transcript(s): Date received \_\_\_\_\_  
\_\_\_\_ Program Admission Letter attached (if applicable)  
\_\_\_\_ Date reviewed by Committee \_\_\_\_\_; Date applicant notified \_\_\_\_\_

**APPLICANT INFORMATION**

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (MI) \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Mobile: (\_\_\_\_) \_\_\_\_\_

U.S. Citizen: Yes No Permanent U.S. Resident: Yes No Other Phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Where did you hear about the scholarship? \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION- (If a minor)**

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_ Occupation: \_\_\_\_\_

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_ Occupation: \_\_\_\_\_



## HIGH SCHOOL INFORMATION

School Name: \_\_\_\_\_ Graduation Date (Month/Year): \_\_\_\_/\_\_\_\_

Address (City, State, Zip): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

High School Diploma \_\_\_\_\_ GED \_\_\_\_\_ Other \_\_\_\_\_

## POST SECONDARY SCHOOL INFORMATION (Use official school names)

### Previously Attended Schools/Programs (if applicable):

School Name: \_\_\_\_\_ City/State/Country: \_\_\_\_\_

School type: 4-year university/college 2-year community/technical college Other \_\_\_\_\_

Dates Attended: \_\_\_\_\_ Degree/Certification: \_\_\_\_\_

Did you complete the program? \_\_\_\_ Yes \_\_\_\_ No If not, why? \_\_\_\_\_

List additional previous educational efforts: \_\_\_\_\_

### FUTURE PLANS (what the Scholarship is for):

School/College you **PLAN** to attend: \_\_\_\_\_

City/State/County: \_\_\_\_\_

School type: 4-year university/college 2-year community/technical college Other \_\_\_\_\_

Degree Sought: \_\_\_\_\_ Bachelor \_\_\_\_\_ Associate \_\_\_\_\_ Certificate \_\_\_\_\_ Other \_\_\_\_\_

Degree/Major or Area of Training or Certification: \_\_\_\_\_

Have you applied? \_\_\_\_ Yes \_\_\_\_ No Have you been accepted? \_\_\_\_ Yes \_\_\_\_ No (Attach acceptance Letter)

Expected Start Date: \_\_\_\_\_

Returning student/currently enrolled? \_\_\_\_ Yes \_\_\_\_ No Expected Graduation Date: \_\_\_\_\_

### If you are undecided, list additional universities, colleges or programs you have applied to and been accepted:

Name of School	City, State and Zip	Start Date	



## WORK EXPERIENCE

Employer & Job/Position	Dates (Month/Year)	Hours Per Week	Amount Earned

## EXTRACURRICULAR ACTIVITIES / AWARDS & HONORS

List all extracurricular and community activities from the past 4 years. Do not include paid activities.

Activity	Dates (Month/Year)	Hours Per Week	Positions/Awards/Honors/Offices Held

Describe any academic honors, awards, and/or recognition you have received.

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## SCHOLARSHIP AWARDS & GRANTS

List the name and annual amount of any scholarships or grants you have been awarded for the coming school year only.

Scholarship/Award/Grant Name	Amount	Applicable to all schools? Yes/No	Circle One
			Granted / Pending
			Granted / Pending
			Granted / Pending
			Granted / Pending

Make a brief statement or summary of your plans as they relate to your educational, career objectives and long-term goals. (Attach additional page if necessary)

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## TRANSCRIPT INFORMATION

**A complete official high school transcript of grades** is required to be sent with this application or noted to be sent separately (for students presently attending high school).

Students currently or previously enrolled in higher education please **include all college/trade school transcripts from each school attended.**

## CERTIFICATION

### 2024 Salvation Army Kenneth Hill Scholarship

The Salvation Army has the sole responsibility for selecting recipients base upon criteria set forth in the program's description. This application becomes the property of The Salvation Army.

I acknowledge decisions are final. I certify I meet the eligibility requirements of the scholarship program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. If requested, I will provide proof of income. Falsification of information may result in termination of any award granted. I agree my contact information may be released to The Salvation Army Texas Division.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please retain a copy for your records.

I understand The Salvation Army Kenneth Hill Scholarship has the following guidelines:

- Applicant must be a resident of Hood County seeking a certification/license/or degree;
- Demonstrate financial need through the SA Ken Hill Scholarship Financial Aid Forms attached or FAFSA;
- Have applied to and been accepted by the school/program you plan to attend or provided enrollment information/requirements.

Applicant's Name (printed): \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_