# Scholarships due date:

April 12<sup>th</sup>

Bring scholarships and additional documentation to Ms. Mendoza by the due date.

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73.			



# Five Area Telephone Cooperative and West Plains Telecommunications

# College Scholarship Application - 2019

## Deadline for Application-

#### **Statement of Eligibility**

Five Area Telephone Coop and West Plains Telecommunications award a number of scholarships to high school seniors who reside in one of the telephone exchanges served by our Companies. The scholarships are very competitive and receive careful review by our Board of Directors.

Every qualified high school senior is encouraged to return an application, either through the school administration or individually. To be considered, students must adhere to the following criteria.

High school seniors applying for the scholarship are personally responsible for submitting a completed application form with appropriate signatures and other information required. It is the student's personal obligation to assure that the application form is received by the posted deadline. Applications are due at the office of Five Area Telephone/West Plains Telecommunications in Muleshoe, TX no later than the end of the workday on

. Please carefully read the additional eligibility requirements for all applicants:

1. The student must be in the immediate family or a dependent of an active Five Area/West Plains customer who is receiving landline telephone service from Five Area/West Plains. Cellular phone service does not qualify for scholarship eligibility.

2. The student must use the scholarship to attend an accredited vocational school, a college, or a university. Students may transfer to or from institutions without penalty as long as academic eligibility is maintained. Should the student drop out of school for any reason, the unused portion of the scholarship may be rescinded.

- 3. The student must have EXACTLY two (2) letters of recommendation accompanying the application form. One of the letters must be from a school official (teacher, principal, counselor) from the school where the student is attending and will graduate. The other letter may be from any other adult who may attest to the student's qualifications and abilities. Supplemental materials including additional letters, transcripts, or other attachments may cause the application to be discarded and removed from consideration.
- 4. The student has the responsibility to assure that the application form is complete and is legible with all signatures and supporting information. Completed application forms must be submitted by the posted deadline to following address:

Five Area Telephone/West Plains Telecommunications % Brenda Clark, Executive Assistant P.O. Box 448 Muleshoe, Texas 79347 806-272-5533 t

# Scholarships are administered through Five Area Telephone Cooperative & West Plains Telecommunications as follows: \$500.00 each semester from Fall 2019 to Spring 2021



Student's name:	List of scholarships received to date:
Five Area/West Plains customer's telephone #:	
	High school awards or offices held:
Five Area/West Plains customer's name:	
Student's mailing address:	
(street/box)	
(city, state, zip code)	High academic honors (i.e., National Honor Society, etc.):
Student's social security number:	
Parents or guardians' name:	
Telephone number where parent or guardian may be reached during the day:	· Civic, community, or volunteer activities:
Parent or guardian's e-mail address:	
Name of high school attending:	
Name of college or university you expect to attend:	Paid employment or work experience:
Field of study or vocation you plan to pursue:	
· · · · · · · · · · · · · · · · · · ·	

#### TO BE COMPLETED BY AUTHORIZED SCHOOL OFFICIAL

Student's cumulative grade point average (Grade	les 9-12):	<del>_</del>
Numeric class standing #	in a class size of	students
ACT Score: S	SAT Score:	
Signature and title of school official:		
(Name)		
(Title)		
I hereby grant my permission for the Five Area/and/or my school records to determine my eligib Student's signature:	pility for the selection of scholarship re	ecipients:
Five Area/West Plains customer's signature:		
Relationship to student (father, mother, guardian	n):	
APPLICA	ATION CHECKLIST	
Are all blanks completely filled out?	Are there exactly two le	etters of recommendation?
Is the section "TO BE COMPLETED BY AUTHORIZED SCHOOL OFFICIAL" compleand signed by appropriate official?	Has your parent or lega appropriate line?	l guardian signed on the

Five Area Telephone Cooperative/West Plains Telecommunications Scholarship Applications must be received by our Office NO LATER THAN THE END OF THE WORKDAY ON , APRIL 2019 to be considered.

Five Area Telephone Cooperative/West Plains Telecommunications P.O. Box 448 Muleshoe, Texas 79347 806-272-5533

## Muleshoe Area A&M Club





#### **Scholarship Application**

Scholarship eligibility is as follows:

- Graduating seniors, enrolling at Texas A&M College Station.
- All students must be able to provide proof of acceptance to Texas A&M College Station.

#### This application must be received by

Email to: bbamert@bamertseed.com

Plo	ease print neatly or type:				
1.	Name:				
	Last	First		Middle	
2.	Date of Birth:	*1	43		
3.	Gender: Male □ Female □				
4.	Permanent Address:				
5.	Phone Number:	<del></del>	Email:		
6.	Major at A&M:		×		
7.	Will you be a member of the Corps of	Cadets: Yes□	No□		
8.	List of parents, siblings and grandparer	nts who have a	ttended T	exas A&M:	
	Names		Class	Relationship	
	· · · · · · · · · · · · · · · · · · ·				
				-	

9. Please list the high school that you are graduating from.			
	High School:	Curent GPA: _	
15.	Extracurricular Activities (list top 5):		
	Organization	Position	Description
			<u> </u>
	<del></del>		
16.	Awards and Achievements (list top 5):		a "
	Award	Year	Description
17.	Community or Volunteer Service (list top 5)		
	Award	Year	Description
	·		
		<del></del>	
	· · · · · · · · · · · · · · · · · · ·		

18.	. Work, Internships, or Summer	Activities (list top	5):	
	Job	Year	Descri	ption
1				
,				
19:	Do you have any immediate fam:		e actively involved in	the Muleshoe Area A&M Club?
,	so, please describe your relationsh		-	
	. so, promo assorto jour rotations.	inp unit mon mitory		
	1			
	following information is optional;	· -	•	long with academic achievement
on	nmunity service, extracurricular act	tivities, and your we	ork history.	
A.	Father or Guardian name:			
	Address:			
	Occupation:			
	Mother or Guardian name:			
	Address:			
		11		
В.	Parent's Gross Income:	C	. Student's Gross Inco	me:
D.	Total household occupants includ	ing yourself:		
E.	Number of Household occupants	including yourself i	n college next year: _	X
F.	Have you received any other scho	olarships? (list top 3	)	
	Name of Scholarship	Si .	Amount	Number of Years
	**			
				-

Along with this application, please submit the follow	wing
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- Two letters of recommendation.
- Your letter of acceptance from Texas A&M College Station.
  - o If you have not yet been accepted, please send a copy of your letter as soon as you receive it.
- A one-page response to one of the following essay topics:
  - o Why do you want to go to Texas A&M?
  - o Tell us about yourself and your hope for the future.

I certify that the information in, and submitted with, this appli	ication is complete and correct to the best of my
knowledge.	

"Aggies do not lie, cheat or steal nor tolerate those who do."

# Jenny Slippers Scholarship

Name:			Phone:	
Address: _				
Criteria:		eshoe High Scl ling a college o		y in the fall
Current G	PA:	ACT:		SAT:
Counselor S	Signature:			
Name of Co	ollege or Unive	rsity:		
# in family		# i1	college _	
Yearly Fam	nily Income			
Extracurric	ular Activities:			
Awards and	Honors:			
How would	this scholarshi	p help you?		

# **Muleshoe Ag Booster Scholarship Application**

Date:	
Name:Last	First Middle
Permanent Address:	
Father's Employer:	
Mother's Employer:	
Date of Birth:	Telephone:
College you plan to attend:	
Proposed Major:	
SAT/ACT Score:	Rank in Class:
Family Income Range:	Total Family Size:
Under \$15,000	Number in College Next Fall
\$15,000 - \$29,000	Including Yourself:
\$30,000 - \$45,000	
Over \$45,000	
List High School Activities, Clubs, Class	Offices held, etc.

Church and Community Activities, Hobbies, Interests, Etc.		
	to attend college, how this scholarship would of your financial need. (If necessary, attach a	
Personal References:		
Name:		
Address:	Telephone:	
Name:		
Address:	Telephone:	
Name:		
Address:	Telephone:	
Signature of Applicant:(Must be a	an original signature)	

Return Scholarship Application to Mr. Thomason

# Muleshoe TCTA Scholarship Application (Must be an EDUCATION Major at Post-Secondary Level)

st M	liddle
=	
ephone:	
Rank in Class:	
Total Family Siz	ze:
Number in College Ne	
Including Yourself:	
ces held, etc.	
,	
	Rank in Class:

Page 2- Muleshoe TCTA Scholarship Church and Community Activities, Hobbies, Interests, Etc. In your own words, tell why you want to attend college, how this scholarship would help you, and give a brief statement of your financial need. (Use additional space on back if necessary) Personal References: Address: \_\_\_\_\_\_Telephone: \_\_\_\_\_ Address: \_\_\_\_\_ Telephone: Address: \_\_\_\_\_\_Telephone: \_\_\_\_\_

(Must be an original signature)

Signature of Applicant:\_\_\_\_

# **Kuykendall Scholarship**

Name:			Phone:	
Address: _				
Criteria:		at Muleshoe High attending a colle	h School ege or university in	the fall
Current C	GPA:	Rank:	ACT:	SAT:
*Counsel	or Signa	ture:		
Name of C	College or	University:	184	· · · · · · · · · · · · · · · · · · ·
Awards an	d Honors:		•	
Work Expe	erience:			
		0		
Future Plar	ns:			
				:

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# <u>Muleshoe ISD School Board / Administration Scholarship</u>

Name:		Phone:	-
Address:			
Criteria: Senior : Plan on	_	h School ege or university in	the fall
Current GPA:	Rank:	ACT:	SAT:
*Counselor Signa	ture:		
Name of College or	University:		
Extracurricular Activ			
Awards and Honors:			
Work Experience: _			,
Future Plans:			

	- F

## THE ELIZABETH B. WATSON SCHOLARSHIP

The Elizabeth B. Watson scholarship was established in 1992 to honor retiring educator, Elizabeth B. Watson. Mrs. Watson retired with 50 years of service in the field of education. Forty-six of those years were in the Muleshoe Independent School District where she has served over the years as teacher, principal, and assistant superintendent. Her reputation as an outstanding educator is known throughout the state, and it is her desire to assist young people to enter into this challenging, exciting field.

The scholarship fund will be managed by the Opportunity Plan, P. O. Box 1035, Canyon, Texas 79015. The \$500 scholarship will:

- 1) Be presented to a Muleshoe High School graduating senior.
- 2) Be presented to a senior who is planning to enter the field of education as a career.
- 3) Be awarded in two installments. The first \$250 will be paid upon enrolling as a full time student in any college or university. The second \$250 installment will be paid the semester in which the student enrolls in a student teaching program leading to a Texas Teaching Certificate.

The selection committee will use the following criteria to select recipients:

- The applicant's desire to have a career in the field of education and probability of success in that field.
- 2) The applicant's academic record.

To be considered by the selection committee, an applicant's file must contain the completed application form, an academic achievement record (transcript), and three letters of reference. One of those three letters must be from a MISD staff member (teacher, counselor, librarian, or administrator).

# ELIZABETH B. WATSON SCHOLARSHIP APPLICATION

		Date
Name	SS#	
Address		Telephone
Birth Date		
Father's Occupation or Employer		
Mother's Occupation or Employer	•	
SAT or ACT Score	GPA	Class Rank
Number of family living at home	Number of family n	nembers in college next fall (include yourself)
Please describe any school, communit which have contributed to your decision	n to seek a career in the	field of education.
		A SAME AND
	`	The state of the s

has had an impact of Describe when you of	on your life and what traits of that tea	below either 1) Describe a teacher who acher would you want to emulate or 2) what influence you hope to have on the
		AND THE RESERVE OF THE PARTY OF
	alle Allen Control	
	The state of the s	
		THE CASE OF THE CA
	15Vaccionalismon action 1	
		The state of the s
List three references administrator, counse	s, not related to you, who know you wel elor, or librarian.	<ol> <li>One of them <u>must</u> be a MISD teacher,</li> </ol>
Name	Address	Telephone
Attach transcript to the	he back of this application.	

## First Bank of Muleshoe Scholarship

Date:	
Name:Last	First Middle
Permanent Address:	
Telephone:	
Name of Parents:	
Occupation or Employer: Fath	ner:
Moti	her:
College you plan to attend:	
Proposed Major:	
SAT/ACT Score:	Rank in Class:
Family Income Range:	Total Family Size:
Under \$15,000	Number in College Next Fall Including Yourself:
\$15,000 - \$29,000	morating routesin.
\$30,000 - \$45,000	
Over \$45,000	
List High School Activities, Clubs, Clas	ss Offices held, etc.

Awards and	Honors:	
In your own	words, tell why you want to attend college.	
Write a brief	statement why you need this scholarship and how it would help you	
further your	education, etc.	

# Jana Goodwin Floyd Scholarship Fund (Must be a NURSING Major at Post-Secondary Level)

Date:		
Name:Last	First	Middle
Permanent Address:		
Father's Employer:		
Mother's Employer:		
Date of Birth:Home	Telephone:	
College you plan to attend:		
Proposed Major:		
SAT/ACT Score:	Rank	in Class:
Family Income Range:	Total	Family Size:
Under \$15,000	Number in College Next F	College Next Fall ourself:
\$15,000 - \$29,000	morading 10	
\$30,000 - \$45,000		
Over \$45,000		
ist High School Activities, Clubs, Class	Offices held, etc.	
Church and Community Activities, Hobb	ies, Interests, Etc.	

Page -2 Jana Goodwin Floyd Scholarship Fund (NURSING)

as your major of study? How	u want to attend college? Why you picked Nursing this scholarship would help you? And give a brief d. (Use additional space on back if necessary)
	6
•	
	1
Personal References:	
Name:	
Address:	Telephone:
V.	
Name:	
Address:	Telephone:
Signature of Applicant:	st be an original signature)
(Mus	st be an original signature)
AUTHORIZED SIG	GNATURES FOR APPLICATION REVIEW
CNA Teacher Signature	Principal Signature

# Farm Bureau-Bailey County Scholarship (Family must be a Bailey County Farm Bureau member)

Date:	Membership #	
Name:		41
Last Permanent address:	First	Middle
Telephone:	<del>-</del>	
Name of parents:		
Occupation or Employer:	Father:	
	Mother:	
College you plan to attend:		
Proposed major:		
SAT/ACT Score:		Rank in class:
Family Income Range:Under \$15,000\$15,000-\$29,000\$30,000-\$45,000Over \$45,000 List High School Activities, Clubs, Cla	ass Offices held, e	Total family size:  Number in college next fall including yourself:

Church and Community activities, hobbies, interests, etc.		
Awards and Honors:		
_ ×		
In your own words, tell why you want to attend college.		
Write a brief statement explaining why this scholarship would be beneficial for you to further your education, etc.		