

## HOW TO SUBMIT AN APPLICATION FOR AN MLK SCHOLARSHIP

For Seniors at Bastrop and Cedar Creek High Schools

Step by step instructions:

**GET TWO LETTERS OF RECOMMENDATION: ONE FROM A TEACHER OR OTHER SCHOOL EMPLOYEE AND ONE FROM SOMEONE YOU KNOW IN THE OUTSIDE COMMUNITY.**

Check when done \_\_\_\_\_

**COMPLETE THE APPLICATION, FILLING IN ALL THE BLANKS.**

Check when done \_\_\_\_\_

**MAKE FOUR COPIES OF THE COMPLETED APPLICATION AND FOUR COPIES OF YOUR TWO LETTERS OF RECOMMENDATION**

Check when done \_\_\_\_\_

**STAPLE EACH APPLICATION TO EACH PAIR OF LETTERS OF RECOMMENDATION**

Check when done \_\_\_\_\_

**PUT THE FOUR PACKETS OF STAPLED DOCUMENTS INTO ONE ENVELOPE**

Check when done \_\_\_\_\_

**RETURN TO THE COUNSELING OFFICE BY February 20, 2023**

**YOUR APPLICATION CANNOT BE CONSIDERED UNLESS YOU FILL IN ALL THE BLANKS AND ENCLOSE THE REQUIRED NUMBER OF COPIES OF THE APPLICATION WITH THE REQUIRED NUMBER OF COPIES OF THE RECOMMENDATION LETTERS.**

If you have questions, see Karen Estrada in the Counselors' Office or call Lucy Todd at 303-9501.

**APPLICATION  
THE DR. MARTIN LUTHER KING SCHOLARSHIP**

**QUALIFICATIONS**

The applicant must be a graduating senior at the Bastrop or Cedar Creek High School. Seniors must be enrolled in a college, junior college, or trade school as of August 31, 20~~22~~**23**

Upon receipt of proof of enrollment, funds will be mailed directly to the institution and credited to the student's account.

Four MLK Committee members will read the applications and will interview finalists before awarding the scholarships. Information in this form is confidential and will be used only for evaluating scholarship applications

**APPLICANT INFORMATION**

Applicant's name \_\_\_\_\_

Email address: \_\_\_\_\_

Address (street, city, zip code): \_\_\_\_\_

Telephone (home and cell): \_\_\_\_\_

Mother's name and address \_\_\_\_\_

Mother's occupation \_\_\_\_\_

Father's name and address (if different) \_\_\_\_\_

Father's occupation: \_\_\_\_\_

Total Gross Income of Parents: \$ \_\_\_\_\_ per month or \$ \_\_\_\_\_ per year.

Total number of children supported by parents: \_\_\_\_\_

Are you participating in the free/reduced cost lunch program? \_\_\_ Yes \_\_\_ No

Has application been made to a college, junior college or trade school? \_\_\_ Yes \_\_\_ No

Please list \_\_\_\_\_

Your SAT Score: \_\_\_\_\_ or ACT score (if applicable)      Your current GPA \_\_\_\_\_

Your current academic class standing \_\_\_\_\_

**NEEDS AND FUTURE PLANS**

Please describe any difficulties your family faces in paying for your further education:

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Please state what you plan to be doing in five years time:

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Community Involvement -- Describe your high school extra-curricular activities:

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