



Home Builders Association of San Angelo

Instructions and Checklist for Completing Scholarship Application

Two (2) \$1,000 scholarships will be awarded by the Home Builders Association of San Angelo (HBASA) to two (2) deserving high school seniors, or equivalent. Scholarship checks will be sent directly to the designated school after verification of enrollment.

ELIGIBILITY CRITERIA:

1. The applicant must be a US citizen and planning to enroll into a institute of high learning (i.e., university, community college or vocational school) no later than September 1, 2019.
2. The applicant must be directly affiliated with an HBASA member in good standing, either as a family member or an employee. Preference will be given to immediate family of **active** HBASA members.

APPLICATION REQUIREMENTS:

The attached scholarship application must be completed by the student, hand written or typed, and must be received by the HBASA no later than 4:00 pm on April 19, 2019. ***Incomplete applications will not be considered.*** Below is a list of all necessary requirements:

- HBASA Scholarship Application, signed by applicant & current HBASA member sponsor
- Current High School Transcript
- SAT and/or ACT Score Sheets (if both have been taken)
- At Least Two (2) Letters of Recommendation
 - One (1) Academic Recommendation
 - One (1) Personal Recommendation
- Mail Original Application with Attachments by 5:00 p.m. on April 19, 2019 to:

Home Builders Association of San Angelo
Attn: Scholarships
4172 S. Jackson
San Angelo, TX 76903

Please contact the HBA office with any questions, (325) 949-0140 or info@hbasa.com.



Home Builders Association of San Angelo SCHOLARSHIP APPLICATION

Instructions: **Please type or print legibly in ink.** Do not omit any information. Fill in all spaces. If any item is not applicable, indicate by "N/A". Attach additional sheets where necessary.

A. STUDENT INFORMATION

Applicant's Last Name _____ First Name _____ Middle Name _____

Address: _____ Street _____ City _____ State, Zip _____

(_____) _____
Phone Number _____ E-mail Address _____

_____/_____/_____
Date of Birth

Current High School _____ Date of HS Graduation _____

Which college(s) and/or school(s) do you plan to attend? Applied? Accepted?

(1) _____
Name of School _____ City, State _____

(2) _____
Name of School _____ City, State _____

(3) _____
Name of School _____ City, State _____

Major or intended course of study: _____

B. HIGH SCHOOL INFORMATION

Number in graduating class: _____ Current Class Rank: _____

Grade Point Average in High School (Cumulative): _____

Number of Advanced Placement Classes Taken in High School: _____

Number of Pre-AP/Honors Classes Taken in High School: _____

Number of Dual Credit Courses Taken in High School: _____

Number of College Hours Accumulated During High School: _____

SAT Score: _____ ACT Score: _____

C. EXTRACURRICULAR, PERSONAL, AND VOLUNTEER ACTIVITIES

List any academic and/or other extracurricular school activities in which you have participated, including honors and awards:

List any work experience and/or jobs you have held:

List any community service and volunteer activities in which you have participated:

E. SELF-EVALUATION

Briefly tell about yourself and how receiving this scholarship could help you achieve your academic and career goals.

F. MEMBER CERTIFICATION

To be completed by the HBASA member who is recommending and/or sponsoring applicant.

Member's Name

Member Company

(_____) _____
Phone Number

E-mail Address

Relationship: Parent

Step-Parent

Grandparent

Supervisor

Other _____

Date _____

Member's Signature _____

G. SIGNATURES

**PLEASE READ THE FOLLOWING STATEMENT CAREFULLY
AND SIGN AND DATE THE APPLICATION**

I hereby certify the above is true and correct to the best of my knowledge, and permission is given to verify the information contained in this application. In the event it is discovered that any part of this application is falsified or not original, I agree to refund any monies that may have been awarded. I hereby authorize the HBASA to receive high school transcript copies and I give the Home Builders Association of San Angelo permission to use my name in any release of information to the media for public relation purposes.

Date_____ Student Signature_____

Date_____ Parent/Guardian Signature_____

Return completed application with attachments to:

**HBASA
Scholarship Applications
4172 S. Jackson
San Angelo, TX 76903**

By: 4:00 p.m. on April 19, 2019