

Montgomery Fire Department - MCESD#2
"Together We Can Make A Difference" Scholarship

20590 Eva Street - Montgomery, TX 77356 - 936-597-4455

Application

Date of Application:		MHS Student ID#:	
Applying For:	<input type="checkbox"/> Medical Scholarship	<input type="checkbox"/> Teaching Scholarship	
Applicant Information			
Last Name:	First Name:		Middle Initial:
Address/City/State/Zip:			
Email Address:			
Telephone Numbers:	Home:	Cell:	
Date of Birth:	Your Age:		
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female			
High School Career - Community Involvement			
GPA:	ACT:	SAT:	Class Rank:
<i>School records - please see attached scholarship checklist</i>			
List below the part you played in High School activities; such as class or school offices held, band or stage band, athletics, drama, choir, debate, newspaper, yearbook, FCCLA, UIL Literary, or any other organization/activities. (Attach an additional sheet if needed.)			
Year / Grade:		Activity:	
Year / Grade:		Activity:	
Year / Grade:		Activity:	
Year / Grade:		Activity:	
Year / Grade:		Activity:	
List below those community activities or clubs in which you participated; such as Boys Scouts, 4-H Club, work, church organizations, volunteering, etc. (Attach an additional sheet if needed.)			
Year / Grade:		Activity:	
Year / Grade:		Activity:	
Year / Grade:		Activity:	
Year / Grade:		Activity:	
Year / Grade:		Activity:	
Financial / Scholarship Information			
Have you applied to any College? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of School Attending:			
Have you been accepted to College? <input type="checkbox"/> Yes <input type="checkbox"/> No Major/Course of Studying:			

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Have you secured any scholarships? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, how much?			
Please list any special circumstances affecting your ability to pay for college/training.			
References (Provide 3 - Not Related To)			
Name	Relationship	Phone	City/State
Letters of Recommendation			
Furnish two (2) letters of recommendation: (1) from Montgomery High School teacher and (1) from a businessperson, community member or another person that is not related to you the applicant.			
Applicant Name / Signature			
I certify that all statements and information contained in this application are true and correct.			
Applicant Signature:			
Date of Application:			

Deadline for Application: Tuesday, March 10, 2020

Hand-deliver or mail to:

Montgomery Fire Department – Scholarship

20590 Eva Street

Montgomery, TX 77356

or

Deliver to: Montgomery High School Counseling Center

Lake Creek High School College & Career Center