

**WHARTON COUNTY MARTIN LUTHER KING JR.  
SCHOLARSHIP APPLICATION**

PRINT OR TYPE ALL INFORMATION

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME TELEPHONE NUMBER \_\_\_\_\_ e-mail \_\_\_\_\_

WITH WHOM DO YOU LIVE WITH? \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

PARENT(S) \_\_\_\_\_

NUMBER OF BROTHER(S) \_\_\_\_\_ AGE(S) \_\_\_\_\_

NUMBER OF SISTER(S) \_\_\_\_\_ AGE(S) \_\_\_\_\_

FATHER'S OCCUPATION \_\_\_\_\_

MOTHER'S OCCUPATION \_\_\_\_\_

ANNUAL TAXABLE FAMILY INCOME LAST YEAR. (MARK WITH AN (X))

\_\_\_\_\_     BELOW \$20,000                      \_\_\_\_\_ \$20,000 - \$30,000  
\_\_\_\_\_     \$30,000 - \$40,000                \_\_\_\_\_ ABOVE \$40,000

**EDUCATION**

NAME OF HIGH SCHOOL ATTENDED \_\_\_\_\_

ADDRESS \_\_\_\_\_

DATE OF GRADUATION \_\_\_\_\_

CLASS RANK \_\_\_\_\_ OF \_\_\_\_\_ STUDENTS    GRADE POINT AVERAGE \_\_\_\_\_

COLLEGE ADMISSION TEST SCORES: SAT \_\_\_\_\_ ACT \_\_\_\_\_

SCHOOL TRANSCRIPT INCLUDED \_\_\_\_\_ (YES) \_\_\_\_\_ (NO)

NAME OF COLLEGE YOU PLAN TO ATTEND:

\_\_\_\_\_

IF YOU HAVE BEGUN YOUR COLLEGE COURSES, WHERE? HOW MANY HOURS  
CREDITED? \_\_\_\_\_

\_\_\_\_\_

**HONORS AND DISTINCTIONS: LIST ALL SCHOOL AWARDS AND DISTINCTIONS YOU HAVE RECEIVED THE LAST FOUR YEARS:**

**EXTRA CURRICULAR ACTIVITIES: LIST ALL SCHOOL ACTIVITIES PARTICIPATED IN DURING THE LAST FOUR YEARS: (INCLUDE COMMUNITY AND CHURCH ACTIVITIES)**

**MAJOR FIELD OF STUDY YOU PLAN TO PURSUE:**

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**HAVE YOU BEEN AWARDED, OR DO YOU EXPECT TO RECEIVE ANY OTHER SCHOLARSHIPS OR GRANTS?**

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**DID YOU EARN ANY MONEY DURING HIGH SCHOOL? YES \_\_\_ NO \_\_\_**  
**IF YES, DESCRIBE YOUR JOB.**  
**POSITION(S) HELD** \_\_\_\_\_

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**\*Responsibilities of Scholarship Recipients**

**Scholarship recipients must commit in assisting the scholarship by initialing one or more of the activities below:**

- \_\_\_ Participating in the Martin Luther King March
- \_\_\_ Participating in Saturday or Sunday events
- \_\_\_ Participating in ticket sales
- \_\_\_ Participating in events other than programs
- \_\_\_ Help with tracking scholarship recipients and reporting

\_\_\_\_\_  
**Signature (student)**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature (parent)**

**APPLICATIONS**

**APRIL 5<sup>TH</sup>. PLEASE INCLUDE A SCHOOL PHOTO WITH YOUR APPLICATION.**

**MAILED BY**

**COMPLETED APPLICATION IS MAILED TO THE ADDRESS BELOW.**

**M.L.K. SCHOLARSHIP – Vivian Wyatt or Mozelle Stephens.  
P.O. Box 84 – GLEN FLORA, TX 77443**