



**Spring Independent School District  
Education Foundation Scholarship  
Application**

**Date Received:**  
**Time Received:**  
**Received by:**

**2019 Spring Way Scholarship**

**Late or incomplete applications will not be considered. Deadline to submit applications: 3:00 p.m., Wednesday, March 20, 2019**

**Applications will be accepted from counselors only!**

Check when completed

- \_\_\_ 1. Please type or print legibly. Use black ink. Only print on front pages (no double-sided pages).
- \_\_\_ 2. Applicant must have a parent or legal guardian who is currently a full-time Spring ISD employee.
- \_\_\_ 3. Official January 2019 transcript must be submitted with this application.
- \_\_\_ 4. Completed application (signed by applicant, parent SISD employee and counselor upon completion).  
The application pages should be paper clipped, no staples.
- \_\_\_ 5. All requested items must be completed and/or included for the application to be accepted.
- \_\_\_ 6. The completed application and transcript must be delivered to your counselor *no later than*  
**3:00 p.m., Wednesday, March 20, 2019.**

**Applications are due to the SISD Education Foundation office from the school counselors**

**NO LATER than 3:00 pm, Tuesday, April 2, 2019. Deliver to:**

Sandra Harper Scott  
SISD Education Foundation  
16717 Ella Blvd., Houston, TX 77090  
[EducationFoundation@SpringISD.org](mailto:EducationFoundation@SpringISD.org)

**Applicant Information**

_____	_____	_____
Last	First	Middle Initial
_____	_____	_____
Address	City	Zip Code
_____	_____	_____
Primary Phone	Alternative Phone	Date of Birth
_____	_____	_____
Student ID #	High School	

**Spring ISD Parent/Legal Guardian Information (Must be current Spring ISD Employee.)**

_____	_____	_____
Last	First	Middle Initial
_____	_____	_____
SISD Employment Location		Position
_____	_____	_____
Address	City	Zip Code
_____	_____	_____
Home Phone	Work Phone	Email Address

Applicant \_\_\_\_\_  
Last First

**Test Scores: (attach copy of Student Score Report)**

SAT: Critical Reading \_\_\_\_\_ Math \_\_\_\_\_ Total SAT Score \_\_\_\_\_

ACT: Composite Score \_\_\_\_\_ Weighted GPA \_\_\_\_\_

<p><b>FOR COUNSELOR USE ONLY:</b> Senior Year Attendance %: _____ DSG Hours _____</p>
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College or Accredited Technical School Preference(s): \_\_\_\_\_

Major: \_\_\_\_\_ Degree Sought: \_\_\_\_\_

**Brief Statement of Career Plans / Life Goals** Please attach an additional document if more space is needed.

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**What are your plans for funding your college education? Explain how this scholarship would benefit you?** (Be specific) Please attach an additional document if more space is needed.

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**Personal Statement:** Tell us about yourself. Describe what makes you unique. Please include any special circumstances. Please attach an additional document if more space is needed.

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Applicant \_\_\_\_\_  
Last
First

**HIGH SCHOOL ACTIVITIES (Grades 9 - 12 only)**

Organization	Position or Office Held	Hours per Week or Month Required	How Long Were You Involved (months/years)
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**School-Related Extracurricular Activities. If none, please explain.**


**Volunteer/Community Service (Not School Related) If none, please specify why.**


**Honors / Awards Received from School and Community Organizations**


**Work Experience. If none, please explain.**


\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
SISD Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Counselor Signature

\_\_\_\_\_  
Date