



SCHOLARSHIP APPLICATION

WOMEN'S DIVISION OF THE ANDREWS CHAMBER OF COMMERCE

To be considered for the Women's Division scholarship you must complete this application in its entirety and attach all requested documents. The application must be returned in a sealed envelope marked "Scholarship Application" to the Andrews Chamber of Commerce, 700 W. Broadway, Andrews, TX 79714; no later than 5PM, April 10th, 2026.

I. Student Information

Applicant # _____
(office use only)

(A) Name: _____

(B) Street
Address _____

(C) City _____ State _____ Zip _____

(D) Telephone _____

(E) Date of
Birth _____

II. Academic Information

Applicant # _____
(office use only)

(A) Date of Graduation _____

(B) High School Rank: _____ of _____ High School
GPA _____

(C) ACT Composite Score (if available) _____ Date
Taken _____



(D) SAT Composite Score (if available) _____ Date
Taken _____

III. College Plans

(A) Name and address of universities, colleges and/or vocational programs to which you applied. (If you have made a decision regarding which college or vocational program you will be attending, or if you have been accepted please indicate so).

Name _____ Date _____
Accepted

(B) When will you enroll in college as a first-time, full-time student?

(C) Have you applied and/or received other financial aid from any other source (i.e. grants, athletic scholarship, academic scholarship, etc.)? Yes _____ No _____

(D) If you answered yes to the above, please describe (source, amount, date, time period)



(E) Field in which you plan to study or major, and why?

(K) What is your estimated cost of attendance for your first year of college, and how do you plan to finance it? (Answer should be specific and detailed, i.e.: \$2,500 parents - \$2,000.00 loan - \$500.00 scholarship)

IV. Community Service

(A) Please list any extra-curricular school activities, as well as community activities in which you have participated, dates participated, and short description of your involvement. (attach an extra sheet if needed)

<u>Organization/Extra Curricular</u>	<u>Dates Participated</u>	<u>Description of Involvement</u>
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If you have any relatives who are members of Women's Division, Chamber Board of Directors or staff of the Chamber, please give name and relationship_____



- Attach the following with application:
1. High School Transcript
 2. Attach Essay: Tell us about an event or person that helped shape who you are today.
 3. Letter of Recommendation

Signature of Applicant _____

Signature of Parent/Guardian _____ *Date* _____

(2) \$1000 Scholarships will be awarded - payment of \$500 will be made to the school with proof of enrollment in the Spring and one in the Fall. Student must provide proof of enrollment for each semester which includes, student id provided by the University and schedule of classes.