



CLARENDON COLLEGE

Pat Steinbrugge Memorial Scholarship Application

The purpose of the scholarship shall be to provide scholarships and financial assistance for students who meet the following criteria:

- Must reside within a 80 mile radius of Clarendon College
- A full-time student enrolled in Clarendon College taking a minimum of 12 hours per semester.
- High School graduate with a minimum of a 3.0 overall GPA
- Must demonstrate financial need

If the recipient meets the above requirements, he or she is eligible to receive a \$600 scholarship to help cover the cost of tuition, fees, books, and/or on-campus housing for one semester.

INSTRUCTIONS FOR APPLICATION – ACADEMIC TERM: 2019-2020

1. Only complete applications will be considered. DO NOT LEAVE ANY ITEMS BLANK.
2. Attach a current copy of your high school and/or college transcripts.

****PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK****

APPLICANT DATA

Last Name	First Name	MI
-----------	------------	----

Permanent Home Address	Permanent Home Phone Number
------------------------	-----------------------------

City	State	Zip Code	County
------	-------	----------	--------

EDUCATIONAL DATA

High School Attended	Graduation Date	Ranking in Graduation Class (%)
----------------------	-----------------	---------------------------------

Do you have a GED? If yes, attach a copy	Date Received GED
--	-------------------

College Last Attended	Year Last Attended	Number of Hours Completed
-----------------------	--------------------	---------------------------

Intended Major at Clarendon College	At which location are you attending classes?
-------------------------------------	--

****PLEASE ANSWER THE FOLLOWING QUESTIONS IN THE SPACE PROVIDED BELOW.****

Are either of your parent's alumni of Clarendon College?

List any extra-curricular activities you have been involved in (ex: sports, clubs, FFA, etc.)

List any community service activities you have been involved in.

List any awards and honors that you have received.

Briefly describe why you are applying for and qualify for this scholarship.

I certify that the information on this application are true and correct to the best of my knowledge.
I understand that the donors will be involved in the selection of recipients.

Applicants Signature Date

Return this application along with your High School and College Transcript's to:

Clarendon College
Office of Financial Aid
PO Box 968
Clarendon, TX 79226

Clarendon College does not discriminate on the basis of age, sex, color, national origin, race and/or disability in the administration of its educational policies, admission policies, scholarships and loan programs, employment practices, athletic and other school administered programs.