Webb County Heritage Foundation

President of the Republic of the Rio Grande

Scholarship Application

Date _____

Applicant's Name _____
First Middle Last

Address_____
Street Apt. # or P.O. Box #

_____
City Zip Telephone #

E-mail:_____

High School Name_____

Father's Name_____

Mother's Name_____

Guardian's Name_____
(If applicable)

Name your college selection:

_____
(1st Choice) (2nd Choice) (3rd Choice)

Past or current semester's average grade scores_____

List school club activities, honors, and awards received and/ or offices held

_____

_____
(Use additional page if necessary)

List Community Service activities / involvement _____

_____
(Use additional page if necessary)

Applicant's Signature_____

Office Use Only

Date Received _____ **☐ Essay ☐ Recommendation**

J1_____ **J2**_____ **J3**_____ **J4**_____ **J5**_____

Total_____