

KISD Local Scholarship Application

Scholarship Name: TCHS Coca-Cola Fund

Due Date: May 5, 2017

Student Name: _____ Home Phone #: _____

Address: _____ Email Address: _____

Parent/ Guardian Name: _____ Occupation: _____ (optional)

Contact Number: _____ Email Address: _____

Parent/ Guardian Name: _____ Occupation: _____ (optional)

Contact Number: _____ Email Address: _____

Number of siblings living at home: _____ Number of siblings in college: _____

Family Income: _____ under \$25, 000 _____ \$25, 000-50,000 _____ \$50,000- 65,000
 _____ \$65,000- 80,000 _____ \$ 80,000- 95,000 _____ over \$95, 000

Grade Average/Class Rank: _____/_____

College you plan to attend: _____ Major: _____

List below any organizations or activities to which you belong and any work experience.

Clubs, organizations, and/or offices held in high school: _____

Extracurricular activities: _____

Community activities and volunteer projects: _____

Awards: _____

Work experience: Employer	Duties	Dates of Employment
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