Gnade Scholarship Application

Deadline for submission is March 5, 2025

Applicant's Full Name:			
Date of Birth: Month	Day	Year	
Last 4 Social Security	_		
Mailing Address:			
Home phone:	Alternate phone:		
Name of High School:			
High School Graduation Date:			
High School Cumulative GPA:	ACT or Combi	ned SAT score:	
List any AP tests and their scores,	Dual Credit and their gra	ades or other	
college/university classes taken an	d their grades:		
			
Which Texas college/university do	you plan to attend?		
How do you plan on paying for you	r college/university?		
Please list any employment experie	ence and provide dates of	of employment:	
Places describe any ovtrocurricular	r activities:		
Please describe any extracurricular	activities.		
Anything else you want to share wi	th us:		
, a g olde you want to ondie wi			