



Galveston County Republican Party Scholarship Application Form



Patriot Scholarship

I. Personal Information

First Name _____ M.I. _____ Last Name _____

Date of Birth (MM/DD/YYYY) ____/____/____ Male / Female

Home Address

Street Address _____

City _____ County _____

Zip Code _____ Country* UNITED STATES

Phone _____ E-mail _____

II. School Information

Please provide information about the High School you attended

Name of High School Attended _____

Date of graduation (MM/DD/YYYY) ____/____/____

Street Address _____

City _____ County _____

Zip Code _____

Phone _____ E-mail _____

Please provide information about the College you attend (if already enrolled) or plan to attend (if a high school graduate):

Name of University/College _____

Enrollment Date _____ Degree Program _____

Student ID Number (Optional) _____ E-mail _____

Signature _____

III. Academic, Athletic, Service, & Extra Curricula

Current GPA _____ Class Rank Percentile (If graduating High School Senior) _____

List any achievements: _____

List any Extra Curricular Activities including service, athletics, clubs, etc:

List any work experience:

