

Scholorehin Anniioation

Applicant Information Date: _____ Applicant Name: _____ Address: _____ City: ____ Zip: ____ Telephone: _____Email: ____ Applicant Employment: Current GPA: _____ Other Scholarship Assistance? Yes No Amount: _____ Are you related to a member of the Big Country Home Builders Association or Profession Women in Building? Yes No Educational Institution in Which Enrollment is Desired Name: Term Begins: _____ Year of Graduation:____ Tuition per Semester: _____ Payment Due Date: _____ Character References: (Minister, Educator, Supervisor etc.) Name: _____ Phone: ____ Yrs. Known: ____ Address: _____ Relationship: ____ Name: _______ Phone: ______ Yrs. Known: ______ Address: ______ Relationship: ______ Name: ______ Phone: _____ Yrs. Known: ____ Address: _____ Relationship: ____

Please attach an essay to your application. Give a brief resume of your educational background. Include any awards you have received, extra curricular activities you have participated in (sports, clubs, church or civic group, etc.)

Also include any additional information pertinent to applying for a scholarship.

Tell us why you believe you are deserving of this award.

Career Desired:	Field of Study:
Carcer Desired.	

Please return your completed application, essay, and transcript to:

Professional Women in Building of Abilene

Attn: Scholarship Committee

PO Box 4050, Abilene TX 79608

DEADLINE: Friday, March 27, 2020