



# WOMEN IN LONGVIEW DAY

P. O. Box 161

Longview, TX 75606

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Dear Senior Class Counselors and Scholarship Coordinators:

The Women in Longview, Inc. Scholarship Committee is pleased to offer a college scholarship to a **high school senior girl** from the graduating class of 2026.

I would like to take this opportunity to request your assistance in making this scholarship opportunity available to graduating senior girls. For your convenience, I have attached applications and procedures for students in your school who wish to apply for the scholarships.

Applications must be postmarked by **February 13, 2026**. Please return the completed application and all required data to the following address:

**Women In Longview  
P. O. Box 161  
Longview, TX 75606**

Sincerely,

***Linda Brooks***

Linda Brooks  
Women In Longview  
2026 Scholarship Committee

# WOMEN IN LONGVIEW, Inc.

## 2026 SCHOLARSHIP APPLICATION PROCEDURE

Dear Applicant:

Please submit, together in one packet, the following information:

1. **Completed Application Form:** Form is enclosed. Please completely answer all questions.
2. **Academic Transcript:** A copy of your academic transcripts from high school and all colleges or universities you have attended is required. **(IMPORTANT: TRANSCRIPT MUST INCLUDE FALL SEMESTER 2025)** Unofficial transcripts may be submitted as long as they are legible, have not been modified, and show a clear label of the credit-granting institution. If you do not have these available, you must contact the school(s) and request the information.
3. **Letters of Recommendation:** Three letters of recommendation should be solicited from individuals other than immediate family. This may include friends, employers, or educators who can speak to your ability to complete an undergraduate degree program and/or who know of your educational history, abilities, motivation and potential for success. All three letters of recommendation must be submitted in sealed envelopes. They should be enclosed with your application.
4. **Financial Information:** The scholarship is intended for students who would have difficulty paying for school. Please supply information regarding your need for assistance.
5. **Personal Statement:** In **300 words or less**, describe your educational goals and objectives and who or what has been the strongest influence in your life.
6. **High school activities, honors, recognition, community service, and leadership:** Write a statement for each subject that is presented on page 2 of the application form. This could be through school, church, or family activities, and civic work. Include how you were involved and any leadership positions that you held. State the name of the activity, the organization to which you contributed, church, school, how long you were engaged in the activity and the type of work done, and any recognition or awards you have received.

**Packets must be postmarked no later than February 13, 2026 mailed to:**

Women in Longview, Inc. Scholarship Committee  
P.O. Box 161  
Longview, TX 75606

# WOMEN IN LONGVIEW, Inc.

P.O. Box 161  
Longview, TX 75606

## SCHOLARSHIP APPLICATION

**Women in Longview, Inc. will award a scholarship to selected graduating high school senior girls.** The recipients will have a strong academic background and be interested in pursuing a field of study at an accredited college, university, technical, or vocational school. Financial need, community involvement, and letters of recommendation will also be given consideration. Applicants must be U.S. Citizens.

Please complete all areas in their entirety. If something does not apply to you, mark the area "Not Applicable." Print or type your responses and return the application with required documents, as set out in the 2026 Scholarship Application Procedure, to Women In Longview, Inc., Scholarship Committee, P.O. Box 161, Longview, TX 75606 by **February 13, 2026.**

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTACT PHONE NUMBERS: (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_ (CELL) \_\_\_\_\_

☐ PARENT(S) ☐ GUARDIAN(S)

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS (if different than above): \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS (if different than above): \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_

COLLEGE/SCHOOL YOU PLAN TO ATTEND: \_\_\_\_\_

MAJOR FIELD OF STUDY: \_\_\_\_\_

ACT SCORES: Composite \_\_\_\_\_

SAT SCORES: Total \_\_\_\_\_ HIGH SCHOOL GPA (including Fall 2025) \_\_\_\_\_

SENIOR CLASS RANK (most recent) \_\_\_\_\_ NO. OF STUDENTS IN SENIOR CLASS \_\_\_\_\_

COLLEGE CREDITS EARNED: \_\_\_\_\_

**USE SEPARATE SHEET OF PAPER WHERE NEEDED, MARKING THE SUBJECT "SEE ATTACHED"**

LIST HIGH SCHOOL ACTIVITIES IN WHICH YOU HAVE BEEN INVOLVED (Include office or title held):

LIST HONORS OR SPECIAL RECOGNITION YOU HAVE RECEIVED:

LIST COMMUNITY SERVICE ACTIVITIES IN WHICH YOU HAVE BEEN INVOLVED:

INDICATE FINANCIAL CONSIDERATIONS / HOW YOUR EDUCATION WILL BE FUNDED:  
(This could include the number of children or family members that are supported within your household.)

LIST EMPLOYMENT / WORK EXPERIENCE:

**CERTIFICATION:**

I certify that all information in my application packet is correct to the best of my knowledge.

**MEDIA RELEASE:**

If I am the recipient of a Women in Longview, Inc. scholarship, you may release my name and information about me to the media. ☐ YES ☐ NO

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PERSONAL STATEMENT

In 300 words or less, describe your educational goals and objectives and who or what has been the strongest influence in your life.