GenTX Scholarship Application



I'm applying for the: (scholarship name)

(typing your name serves as your signature)

Applicant Information			
Full Name:			Date of Birth:
Mailing Address:		City:	ZIP:
Phone:		Mobile Ph	one? Yes No
Alternate Phone:			Mobile Phone? Yes No
Email Address:			
Number of family i	members living at home, including yourself:		
Number of immediate family members, including yourself, who will be attending college next year:			
Your High School:		G	GPA: Rank:
Name of college/university you plan to attend:			
Have you been accepted to the college/university listed above?			
Have you completed one of the following college assessments?			
☐ ACT Scores: ☐ TSIA			
☐ SAT Scor	res: Ar	e you TSI-co	omplete? Yes No
What is your college major or career goal?			
Provide your activities list, including any community service, employment, awards, achievements, extracurricular activities, church involvement, interests, hobbies, leadership experience, etc.).			
Explain any special circumstances or extraordinary expenses (such as divorce, parenthood, unemployment, illness, etc.) that you would like to have considered.			
I hereby certify that the information presented on this application is accurate to the best of my knowledge and understand that my scholarship application will be reviewed once applicant information and scholarship requirements are fulfilled.			
Full Name:		Date:	