



Submit on or before: May 1, 2021  
Submit all items by email or phone:  
[bawpros@gmail.com](mailto:bawpros@gmail.com)  
PO Box 708  
League City, TX 77574

## Danny Kallen Scholarship Application

### Scholarship Criteria\*

- Actively enrolled student: with intent to attend a 2- or 4-year college or technical school
- 3.0 cumulative GPA
- Intent for a career in hospitality industry  
\*see page 4 FAQ

Include with your application and submit in one (1) PDF file:

- Completed Application
- Official Transcript
- Three (3) letters of recommendation
- Current photograph
- Resume
- Student essay (*500 word minimum*): What impact do you hope to make in the wedding and event industry?  
What prompted you to choose this career?

### Applicant Details:

Name: \_\_\_\_\_  
First Middle Last

Current Address: \_\_\_\_\_  
\_\_\_\_\_

School email: \_\_\_\_\_

Personal email: \_\_\_\_\_

Best phone number: \_\_\_\_\_ GPA/Overall Current Grade %: \_\_\_\_\_

Major: \_\_\_\_\_ Anticipated Graduation: \_\_\_\_\_

Future Career (*list a specific title*): \_\_\_\_\_

Degree:  Associate  Bachelor  Graduate Other: \_\_\_\_\_

**Further Details:**

Parent Name(s): \_\_\_\_\_

Parent Occupation(s): \_\_\_\_\_

\_\_\_\_\_

College Name and Location: \_\_\_\_\_

Semester to apply scholarship funds toward (Fall/Spring): \_\_\_\_\_

Personal Permanent Address (not school address): \_\_\_\_\_

\_\_\_\_\_

Total Units/Credits/Hours Required for Degree: \_\_\_\_\_

Total Unites/Credits/Hours Completed to Date: \_\_\_\_\_

Units/Credits/Hours Currently Enrolled in: \_\_\_\_\_

List of Current Classes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Professional Organizations or Extracurricular Activities you are Involved In: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you participated in a Student Intern Program:  Yes  No

If yes, please list company: \_\_\_\_\_

Please explain your experience and if you found the program to be valuable: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Work Experience**

Company	Job Title	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Financial Information**

Anticipated Educational Cost per Semester: \_\_\_\_\_  
(including tuition, books, housing)

Scholarship & Grants Awarded: \_\_\_\_\_

**Please provide any additional information for our consideration**

*(or include a separate sheet with your submission)*

\_\_\_\_\_

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\_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_