



Town Lake Chapter
The Links, Incorporated
P.O. Box 26395 Austin, TX 78755-0395

The Town Lake Chapter of The Links, Incorporated Scholarship Announcement

The Town Lake Chapter awards a \$20,000 scholarship (\$5,000/year) to a graduating African American High School Senior from an accredited high school in the Austin metropolitan area.

The Town Lake Chapter will review applications from African American high school seniors attending a university or college in the Summer or Fall of 2017. Applicants must meet the following criteria.

- Be in the top quartile of class rank (3.0 GPA or higher)
- Be graduating under the Recommended High School Plan
- Be involved in extra-curricular activities
- Financial need is considered
- Relatives of Links, Inc. are ineligible to participate as a candidate for the scholarship
- All applicants need to disclose if they are related to a member of the Links, Inc. and if so, how are they related

Only completed applications will be considered. Applications must include:

- completed application with one-page essay;
- SAT/ACT scores
- official high school transcript;
- original photograph; and
- a letter of recommendation from the student's counselor or a teacher.

Annual scholarship awarded in two semester payments will be sent directly to the college/university. The scholarship recipient is required to maintain a cumulative GPA of 2.5 each year. **Applications MUST be POSTMARKED no later than March 22, 2017.** Finalists will be invited to meet before the Scholarship Committee. Recipient will be notified and asked to attend an event in June to receive the scholarship award.

Scholarship applications must be **mailed** to: (please do not email applications)

Revllynn Lawson
2700 Via Fortuna Drive, Suite 400
Austin, TX 78746
512-634-3850

For more information about our organization, please visit www.townlakelinks.org

The Links, Incorporated
Town Lake (TX) Chapter Scholarship Application

Name of Scholarship: _____

Please type all information **on both pages**. Return the completed form to the counseling office at your school.

Name: _____ Sex: _____ Age: _____ Ethnicity: _____
Last First

Address: _____ Phone: _____
Street City/State Zip

Email
 Address: _____

Names of Schools attended: Elem: _____ Middle: _____

High School Currently Attending: _____

Mother	Father	Guardian
Name	Name	Name
Home Phone	Home Phone	Home Phone
Address	Address	Address
Occupation	Occupation	Occupation
Business Phone/Ext.	Business Phone/Ext.	Business Phone/Ext.

Number of adults and children who are dependent on parents' financial support: _____

Number of children dependent on parents' financial support: _____ Ages: _____, _____, _____, _____, _____

Number of family members attending college: _____

Describe any existing conditions that are causing unusual financial expenditures for any dependents listed above. Ex: illness, dental work, support of family by only one parent, etc.

Please check approximate annual gross income in the home before deductions. Include all sources of income **except** earnings of minors in part-time employment.

- | | | |
|---|---|---|
| \$0 to \$15,000 <input type="checkbox"/> | \$45,001 to \$55,000 <input type="checkbox"/> | \$75,001 to \$85,000 <input type="checkbox"/> |
| \$15,001 to \$30,000 <input type="checkbox"/> | \$55,001 to \$65,000 <input type="checkbox"/> | \$85,001 to \$95,000 <input type="checkbox"/> |
| \$30,001 to \$45,000 <input type="checkbox"/> | \$65,001 to \$75,000 <input type="checkbox"/> | \$95,001 and above <input type="checkbox"/> |

Education:

Please list in order of preference:

Colleges: 1. _____ 2. _____ 3. _____

Intended majors: 1. _____ 2. _____ 3. _____

What are your career plans after college? _____

For Office Use Only

PSAT _____ SAT _____ ACT _____ Rank _____ / _____ GPA _____

Student's Employment Record:

Business	Type of Work	Approx. # Hours per Wk.	Dates Worked
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list all requested information including the # of years involved. Please be specific. (You may add additional pages if needed.)

Scholastic Awards (Ex. Trustee, Honor Roll, History Award)

Number of Years

_____	_____
_____	_____
_____	_____
_____	_____

Athletic Awards (Ex. Track Team, Volleyball Captain)

_____	_____
_____	_____
_____	_____
_____	_____

Other Extra-Curricular Activities, Awards, or Honors

(Ex. Band, Eagle Scout)

_____	_____
_____	_____
_____	_____
_____	_____

Hobbies, Talents, or Interests not listed above:

(Ex. Piano lessons, youth groups)

_____	_____
_____	_____
_____	_____
_____	_____

Please respond to **ONE** of the essay topics listed below. This is your chance to present your best self to the Scholarship Committee. Attach your **one page** response to your application.

1. My goals for the future and how I plan to achieve them.
2. A personal challenge which I had to overcome and how I overcame it.
3. Someone who has had a significant impact on my life and why/how

I certify that all information on this application is correct:

Student's Signature

Parent's Signature

Counselor's Signature