

## KIWANIS (CARGILE) SCHOLARSHIP QUESTIONNAIRE

FOR SHS, HHS AND IHS GRADUATING SENIORS PLANNING TO ATTEND WESTERN TEXAS COLLEGE AND INTERESTED IN A LOCAL SCHOLARSHIP.

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

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

After graduation do you plan to attend Western Texas College?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, complete the following:

Grade Point: \_\_\_\_\_ Rank in Class \_\_\_\_\_

Do you need financial help to attend college? \_\_\_\_\_

Possible Major: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Number of brothers and sisters dependent on your parents: \_\_\_\_\_

List below any honors you have received at SHS, HHS, or HIS as well as organizations you have been a member of and offices you held:

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List below any comments that you feel might be helpful to the scholarship committee:

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