

# Permian Basin Area Foundation

## Amy Gardner Memorial "Louis Armstrong" Scholarship

### Applicant Data

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Initial \_\_\_\_\_  
Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_  
Permanent Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

### High School Data

High School Name \_\_\_\_\_ Graduation Date \_\_\_\_\_  
Current Ranking \_\_\_\_ in a class of \_\_\_\_ students. SAT Score \_\_\_\_\_ ACT Score \_\_\_\_\_  
School Activities and Honors (please list)

(If additional space is needed please attach a separate sheet of paper)

Community Activities (please list)

(If additional space is needed please attach a separate sheet of paper)

### College Data

College you plan to attend. If unknown, list in order of preference where applications have been submitted.

- 1) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ *Have you been accepted?*  
 Yes  No  Pending
- 2) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  Yes  No  Pending
- 3) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  Yes  No  Pending

My expected college major is \_\_\_\_\_

### Other Scholarships

List other scholarships or financial aid grants you have applied for and their status:

- 1) \_\_\_\_\_ Amount \_\_\_\_\_  Received  Pending  Denied
- 2) \_\_\_\_\_ Amount \_\_\_\_\_  Received  Pending  Denied
- 3) \_\_\_\_\_ Amount \_\_\_\_\_  Received  Pending  Denied

Permian Basin Area Foundation  
Scholarship Application - Continued

**Family  
Data**

Parent/Guardian Name(s) \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address if different from applicant \_\_\_\_\_

Father's occupation \_\_\_\_\_ Employer \_\_\_\_\_

Mother's occupation \_\_\_\_\_ Employer \_\_\_\_\_

Number of dependents supported by Parents \_\_\_\_\_ Ages \_\_\_\_\_

Number of other college age students supported by Parents \_\_\_\_\_

**Financial  
Data**

Family's Yearly Income:

\$0 - \$25,000     \$25,001 - \$50,000     \$50,001 - \$75,000     \$75,001 and Above

Are you currently employed?  Yes  No    Employer \_\_\_\_\_

Do you plan to work while attending college?  Yes  No

Where do you plan to live while in college?

Dormitory     Apartment     Family     Other (please list) \_\_\_\_\_

Please explain if there are any extraordinary family expenses or reasons why Applicant needs this scholarship:

(If additional space is needed please attach a separate sheet of paper)

**Attachments**

Attach your high school transcript indicating a date of graduation. If you are concurrently enrolled in college or have attended college, also attach your college transcript.

Attach at least one letter of recommendation, but not more than three.

Please attach a brief explanation on a separate page, about what band has contributed to your life while being involved in the Andrews Band program and include your contributions to the band program.

**PLEASE READ THE FOLLOWING STATEMENT CAREFULLY:**

I certify the above is true and correct to the best of my knowledge, and grant permission to verify the information contained in this application.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_

Return completed application to:  
Andrews High School Senior Counselor

By:      April 15