



Hallettsville Playday Association
**Ann Mary Vaughn Williams
Memorial Scholarship**

PERSONAL INFORMATION

Full Name	Division in HPA		
<input type="text"/>			
Address	City	State	Zip
<input type="text"/>			
Phone	Email		
<input type="text"/>			
Parent or Guardian			
<input type="text"/>			

ACADEMIC

Applicants must be enrolled in high school and graduating in 2024

Include a copy of your first semester transcript

High School currently enrolled:

Where do you plan to further your education?

What course of study or field of interest do you plan to pursue?

ACTIVITIES, CLUBS & ORGANIZATIONS

List any activities, clubs or organizations you are involved in. Note any leadership positions.

Activity	Years Involved
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Community Service or Volunteer Work

Years Involved

Jobs Held

Responsibilities

REFERENCES & LETTERS OF RECOMMENDATION

Please list three references and include letters of recommendation from each. One must be from an educator or school counselor.

Name

Relationship

Phone

ESSAY

Please submit a 1-3 page essay.

Start by introducing yourself and your plans for the future, then write on the following topic:

What has being involved in HPA taught you, and how has HPA helped you prepare for the next step in your education or career?

SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. I understand that I must pass all high school classes to be eligible for a scholarship. I understand that the requirements for the HPA scholarships include eligibility for year-end awards and accumulation of work points. I understand that to receive the scholarship money I will be required to provide proof of enrollment in an institute of higher education.

Signature of Applicant

Date

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Signature of Parent

Date

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DEADLINE FOR SUBMISSION IS FEBRUARY 10, 2024