





**Houston Junior Forum, Inc.**  
**College Scholarship Application**

You cannot save a completed copy of this form to your computer.  
Please type directly into the form and then print. Thank you!

1. Name: Last: \_\_\_\_\_

First: \_\_\_\_\_

Middle/Maiden: \_\_\_\_\_

2. Male/Female: \_\_\_\_\_

3. Birth Date: \_\_\_\_\_

If married, spouse's full name: \_\_\_\_\_

4. Address/P.O. Box: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

5. Telephone numbers: Home: \_\_\_\_\_

Cell: \_\_\_\_\_

6. Email address: \_\_\_\_\_

7. Years (dates) you attended HJF Preschool: \_\_\_\_\_

8. High School you attend or attended: \_\_\_\_\_



9. Extracurricular activities, organizations, clubs, band, choir, church activities, awards received, offices held, honors, community volunteer, **(be specific)**: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. Class rank if applicable: \_\_\_\_\_ / \_\_\_\_\_

Grade Point Average: \_\_\_\_\_

SAT score: \_\_\_\_\_ ACT score: \_\_\_\_\_

Graduate school entry exam score: \_\_\_\_\_

11. College you wish to attend: \_\_\_\_\_

Colleges to which you have applied: \_\_\_\_\_

Colleges to which you have been accepted: \_\_\_\_\_

12. What is the approximate cost of tuition for the college you wish to attend?

\$ \_\_\_\_\_ per semester.



13. Have you and your parents allocated money for your college expenses? Elaborate!

---

---

---

---

14. Names and amounts of other scholarships applied for: \_\_\_\_\_

---

---

15. State your particular need for scholarship aid at this time: \_\_\_\_\_

---

---

16. How many hours do you plan to take per semester? \_\_\_\_\_

Keep in mind that the HJF Scholarship minimum is 12 hours per semester.

17. Are you currently working? \_\_\_\_\_ Where? \_\_\_\_\_

Hours per week? \_\_\_\_\_

18. Do you plan to work while attending college? \_\_\_\_\_

How many hours per week? \_\_\_\_\_



19. Has anyone in your family received a HJF Scholarship? Yes:  No:

If so, whom: \_\_\_\_\_

Relationship: \_\_\_\_\_

Dates when scholarship received: \_\_\_\_\_

20. Parental Information:

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

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

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

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

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

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_



21. Sibling Information

Name	Age	Dates, if attended Preschool
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



Upon receipt of the completed application, you may be contacted to set up a personal interview with the Scholarship Committee.

If this application is approved, do we have your permission to use your name, picture, or quote in part from accompanying letters or applications, or future letters, in Houston Junior Forum Publications or for displays for the purpose of stimulating contributions to the Scholarship Fund? Yes:  No:

If a scholarship should be granted to me, I will notify HJF Scholarship Committee immediately if it is not to be used for the term and on the campus specified.

---

Signature of Applicant

---

Date

**Return the completed application by email with printable documents to:**  
**[hjfscholarship@gmail.com](mailto:hjfscholarship@gmail.com)**  
**(NO SCREENSHOTS)**

**Or mail to:**  
**HJF College Scholarship Program**  
**P.O. Box 7941**  
**Houston, Texas 77270**

**Call for any questions 713-868-1850**

**APPLICATIONS MUST BE RECEIVED BY APRIL 1**  
**NO EXCEPTIONS**