

PO Box 1648

105 N. Harborth Ave.

Three Rivers, TX 78071

(361)786-4330

**LILLIE MAE WIEDING AND**

**JO AN BOOTH MEMORIAL SCHOLARSHIP**

**Sponsored by Three Rivers Chamber of Commerce**

P.O. Box 1648

Three Rivers, TX 78071

361-786-4330

**This scholarship is open to all students who will attend college next fall.**

**Turn in your applications to the high school counselor.**

**Completed application due by January 20, 2025, 2 p.m. to be eligible.**

***Late applicants will not be considered*.**

***Requirements*:**

1. Complete this application.
2. Include an official transcript or grade report.
3. Applicant must have at least an”80” average.
4. Include ACT or SAT scores if you are still in high school if applicable.
5. Applicant and parent or guardian sign the application.
6. Write an essay in your own handwriting. Please describe yourself, and your future plans. What inspires you? What do you enjoy? Please describe how you have shared your natural time and talents with our school and/or community. Why do you believe you would be a good recipient of the Lillie Mae Wieding and Jo An Booth memorial Scholarship, sponsored by the Three Rivers Chamber of Commerce?

*In applying for this scholarship, I’m aware that I must maintain above average grades of*

*(2.5 on a 4.0 scale), be considered a full-time student, and demonstrate acceptable standards of citizenship and character.*

*I agree to permit the review of this application and my school records by anyone representing the Three Rivers Chamber of Commerce. I also agree to allow the Three Rivers Chamber of Commerce to use my picture in newspaper ads and other announcements.*

*I will submit a copy of my registered classes to the Chamber of Commerce, Three Rivers. Upon receipt of class schedule, scholarship will be awarded.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current GPA \_\_\_\_\_\_\_\_ your rank in class \_\_\_\_\_\_ *Applicant* *Permission*

Date of high school graduation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Today’s Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone and/or email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(For contacting you about this scholarship.)*

Occupation of Father or Husband \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation of Mother or Wife \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of dependent children in family (including Applicant) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many other family members are in college? \_\_\_\_\_\_

Which institution of higher learning do you plan to attend?

First Choice\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Second Choice\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you applied for admission? Y/N

Estimate college expenses for one year $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list the scholarships you have been awarded: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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