



Seven Lakes Student Council Spartans Out Serving Scholarship Application Guidelines

The Seven Lakes Student Council Spartans Out Serving (SOS) organization will award seven \$1,000 scholarships to SOS Seniors in recognition of school and community service for the purpose of encouraging the recipients to proceed in to higher education.

DEADLINE : Wednesday April 15, 2020 by 3:00 PM (No Exceptions). Application should be turned in to the Student Council faculty sponsor, Mrs. Hampshire in Room 1013, for verification.

Scholarship Selection Process: A Scholarship Committee will be formed, consisting of three Katy community members with no direct association to SLHS. The committee will receive copies of the application with all personal identifying information removed to ensure impartial judging.

Requirements for Application

The applicant **MUST**:

- Be a full-time graduating senior in good academic and discipline standing.
- Be a current member of the SLHS Student Council the applicant's senior year.
- Be maintaining a high school GPA of 2.5 or higher
- Have completed a cumulative total of 120 hours of service for all four years of High School.
- Membership in Student Council for the years that service was performed.
- Submit an **anonymous** resume listing all extracurricular activities (school, community, work, and awards, *with no name or address, identified only by your ID number*).
- Submit a copy of your detailed service transcript from www.x2VOL.com
- Submit your typed response to the SOS Scholarship essay question as directed below
- Write your student ID number in the lower right hand corner of each page you submit.**

SOS SCHOLARSHIP ESSAY QUESTION

In one typed page, please describe your most meaningful volunteer experience, and what effect your over-all volunteer experience has had on your plans for the future?



Seven Lakes Student Council Spartans Out Serving Scholarship Application

Name _____ Student ID # _____

Address _____

Telephone (Home) _____ (Cell) _____

E-mail address _____

Date of enrollment in SLHS _____ GPA _____

Number of membership years in SLHS SOS including current year _____

Accredited college, university, or technical school you are considering attending

I agree to the provisions of this application, and I understand that scholarship funds must be returned if I am unable to meet the stipulations set out by the SLHS Student Council SOS and I further declare the information in this application to be true and accurate, to the best of my knowledge.

Signature of Applicant

Date

SOS Use only: Date Received _____

Sponsor Signature _____

Checklist : Following documents are required for application

- Completed Scholarship Application
- Anonymous Resume of extracurricular activities
- Essay response to scholarship question
- Detailed service transcript printout from x2vol