

# Walker Stallcup Memorial Scholarship

Please complete all sections of the application. **The deadline for submission is Saturday, April 30, 2016.**

## Section 1 – Personal Information

Name:	Date of Birth:
Mailing Address:	Physical Address:
Home Phone:	Cell Phone:
Email Address:	Social Security Number:

## Section 2 – Academic Information

High School GPA: \_\_\_\_\_

High School Rank: \_\_\_\_\_ out of \_\_\_\_\_

SAT and/or ACT Score: \_\_\_\_\_

College, University or Vocational School of choice: \_\_\_\_\_

College, University or Vocational School of choice City and State: \_\_\_\_\_

Anticipated Major: \_\_\_\_\_

Anticipated Career: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

# Walker Stallcup Memorial Scholarship

## Section 3 – Extracurricular Activities

A. List all organizations/clubs/teams where you are a member and your role:

Organization/Club/Team	Position Held	Date of Involvement

## Walker Stallcup Memorial Scholarship

**B. List Any Volunteer Work Completed During Your High School Career:**

Organization	Activity	Date of Involvement

**Briefly Describe Your Role And What You Accomplished:**

---

---

---

---

---

**C. List any Awards or Honors You've Received During Your High School Years:**

Organization	Award or Honor	Date

# Walker Stallcup Memorial Scholarship

---

## Section 4 – Short Essays

How are you planning to finance your advanced education?

---

---

---

---

What would you like to tell us about yourself?

---

---

---

---

---

---

Please share any memories or thoughts you have about Walker (Optional):

---

---

---

---

---

---

---

---

Please return your completed application by Saturday, April 30, 2016 to your school counselor or mail to:

Walker Stallcup Memorial Scholarship Fund  
C/O Data SynapSys  
P.O. Box 11  
Bowie, Texas 76230