

Spring Branch ISD

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Samples of Scholarship Applications



UNIVERSAL college APPLICATION

School Report

This form is developed for, and is to be used by, the members of the Universal College Application. All members evaluate this form equally with all other forms accepted by the institution. Please type or print neatly.

APPLICANT INFORMATION

Please complete the applicant information questions below, then give this form to your school counselor. For ease of submission, please provide your counselor with a stamped envelope addressed to each of the Universal College Application colleges to which you are applying.

Please enter your name as it appears on your passport or other official documents.

Legal Name _____ Male Female
Last (Family) First Middle Suffix (Jr., Sr., etc.)

Date of Birth _____ Social Security Number (optional) _____
(mm/dd/yyyy) (###-##-####)

Address _____
Street Address Apt #

City/Town State/Province Country Zip/Postal Code

Current School _____ CEEB Code _____

Please list name, level (Honors, AP, IB, etc.) and credit value of your current year's courses.

Semester #1/Trimester #1	Semester #2/Trimester #2	Trimester #3
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Privacy Notice: The Family Education Rights and Privacy Act (FERPA) allows you to have access to your recommendation after you matriculate unless one of the following occurs:

1. The college or university does not save evaluations after matriculation
2. You waive your access rights below

Yes, I DO waive my rights to access this evaluation No, I DO NOT waive my rights to access this evaluation

My signature below authorizes all schools I attended to provide all requested records and allow review of my application for the admission process chosen on my application.

Signature of applicant _____ Date _____
(mm/dd/yyyy)

COUNSELOR INFORMATION

Counselor's Name _____ Position _____

Counselor's Phone _____ Counselor's Email _____
Begin with Area or Country Code

School _____ CEEB Code _____

School Address _____
Street Address

City/Town State/Province Country Zip/Postal Code

ACADEMIC INFORMATION

Please answer the questions below. Attach to this form an official transcript, including current courses, a school profile, and transcript legend.

Student's dates of attendance used to calculate class rank (if applicable) and cumulative grade point average _____ to _____
(mm/yyyy) (mm/yyyy)

CLASS RANK

Does your school rank students? Yes No If yes, what is the class rank of this student: _____ out of _____

Do any students share this rank? Yes No If so, how many? _____ Is the rank weighted? Yes No

CUMULATIVE GPA

This student's GPA is _____ on a scale of _____ Is the GPA weighted? Yes No

Your school's passing grade is _____ Highest GPA in class _____ Graduation date _____
(mm/yyyy)

SCHOOL PROFILE

Link to School Profile (optional): http://_____

Percentage of graduating class attending four-year institutions _____ two-year institutions _____

Does your school offer classes on a block schedule? Yes No If so, when did block scheduling begin? _____
(mm/yyyy)

If AP tests are offered, do you limit the number of AP courses students can take? Yes No

In comparison with other college-bound students attending your school, the student's course selection is
 Less than challenging Average Challenging Very challenging Most challenging

BACKGROUND INFORMATION

For how long have you known this applicant and in what capacity?

Briefly describe your overall impression of this applicant.

APPLICANT RATINGS

Please rate this student compared to other college-bound students in her or his class I prefer not to participate in the applicant ratings section)

	No Ability to Judge	Below Average	Average	Good	Very Good	Excellent	Outstanding
Academic Success	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extracurricular Success	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EVALUATION

Please attach your evaluation of this applicant to this form. Include your thoughts about academic and personal characteristics. Institutions are particularly interested in information that will help to differentiate this applicant from others.

Overall, I recommend this student for admission Not at all With reservations Fairly strongly Strongly Enthusiastically

Has the applicant ever been placed on probation, suspended, removed, dismissed or expelled from your school? Yes No

Has the applicant ever been convicted of any misdemeanor, felony, or other crime? Yes No

If you answered yes to either question, please provide an explanation and the approximate dates of each incident below.
If necessary please attach your response to the end of this form.

Your signature indicates that all information on this form is factually true and honestly presented and that you are the person submitting this form.

Signature of counselor _____

Date _____

APPLICANT

Legal Name _____
Last/Family/Sur (Enter name exactly as it appears on official documents.) First/Given Middle (complete) Jr., etc.

Preferred name, if not first name (choose only one) _____ Former last name(s), if any _____

Birth Date _____ Female Male US Social Security Number, if any _____
mm/dd/yyyy Optional, unless applying for US Federal financial aid with the FAFSA form

Preferred Telephone Home Cell Home (_____) Cell (_____) _____
Area/Country/City Code Area/Country/City Code

E-mail Address _____ IM Address _____

Permanent home address _____
Number & Street Apartment #

_____ City/Town County or Parish State/Province Country ZIP/Pastal Code

If different from above, please give your current mailing address for all admission correspondence. (from _____ to _____)
(mm/dd/yyyy) (mm/dd/yyyy)

Current mailing address _____
Number & Street Apartment #

_____ City/Town County or Parish State/Province Country ZIP/Pastal Code

If your current mailing address is a boarding school, include name of school here: _____

FUTURE PLANS

Your answers to these questions will vary for different colleges. If the online system did not ask you to answer some of the questions you see in this section, this college chose not to ask that question of its applicants.

College _____ Deadline _____
mm/dd/yyyy

Entry Term: Fall (Jul-Dec) Spring (Jan-Jun)

Decision Plan _____

Academic Interests _____

Career Interest _____

Do you intend to apply for need-based financial aid? Yes No

Do you intend to apply for merit-based scholarships? Yes No

Do you intend to be a full-time student? Yes No

Do you intend to enroll in a degree program your first year? Yes No

Do you intend to live in college housing? _____

What is the highest degree you intend to earn? _____

DEMOGRAPHICS

Citizenship Status _____

Non-US Citizenship _____

Years lived in the US? _____

Birthplace _____
City/Town State/Province Country

First Language _____

Primary language spoken at home _____

Are you proficient in any other languages? _____

Optional The items with a gray background are optional. No information you provide will be used in a discriminatory manner.

Marital Status _____

Religious Preference _____

US Armed Services veteran? Yes No

1. Are you Hispanic/Latino?
 Yes, Hispanic or Latino (including Spain) No

2. Regardless of your answer to the prior question, please indicate how you identify yourself. (Check all that apply.)

American Indian or Alaska Native (including all Original Peoples of the Americas)
Are you Enrolled? Yes No If yes, please enter Tribal Enrollment Number _____

Asian (including Indian subcontinent and Philippines)

Black or African American (including Africa and Caribbean)

Native Hawaiian or Other Pacific Islander (Original Peoples)

White (including Middle Eastern)

FAMILY

Please list both parents below, even if one or more is deceased or no longer has legal responsibilities toward you. Many colleges collect this information for demographic purposes even if you are an adult or an emancipated minor. If you are a minor with a legal guardian (an individual or government entity), then please list that information below as well. If you wish, you may list step-parents and/or other adults with whom you reside, or who otherwise care for you, in the Additional Information section.

Household

Parents' marital status (relative to each other): Never Married Married Widowed Separated Divorced (date _____) ^{mm/yyyy}

With whom do you make your permanent home? Parent 1 Parent 2 Both Legal Guardian Ward of the Court/State Other

Parent 1: Mother Father Unknown

Parent 2: Mother Father Unknown

Is Parent 1 living? Yes No (Date Deceased _____) ^{mm/yyyy}

Is Parent 2 living? Yes No (Date Deceased _____) ^{mm/yyyy}

Last/Family/Sur _____ First/Given _____ Middle _____ Title (Mr./Ms./Dr., etc.) _____

Last/Family/Sur _____ First/Given _____ Middle _____ Title (Mr./Ms./Dr., etc.) _____

Country of birth _____

Country of birth _____

Home address if different from yours _____

Home address if different from yours _____

Preferred Telephone: Home Cell Work

Preferred Telephone: Home Cell Work

(_____) _____
 Area/Country/City Code

(_____) _____
 Area/Country/City Code

E-mail _____

E-mail _____

Occupation _____

Occupation _____

Employer _____

Employer _____

College (if any) _____ CEEB _____

College (if any) _____ CEEB _____

Degree _____ Year _____

Degree _____ Year _____

Graduate School (if any) _____ CEEB _____

Graduate School (if any) _____ CEEB _____

Degree _____ Year _____

Degree _____ Year _____

Legal Guardian (if other than a parent)

Relationship to you _____

Siblings

Please give names and ages of your brothers or sisters. If they are enrolled in grades K-12 (or international equivalent), list their grade levels. If they have attended or are currently attending college, give the names of the undergraduate institution, degree earned, and approximate dates of attendance. If more than three siblings, please list them in the Additional Information section.

Last/Family/Sur _____ First/Given _____ Middle _____ Title (Mr./Ms./Dr., etc.) _____

Home address if different from yours _____

Name	Age & Grade	Relationship
College Attended _____		CEEB _____
Degree earned or expected _____	Dates _____	<i>mm/yyyy - mm/yyyy</i>
College Attended _____		CEEB _____
Degree earned or expected _____	Dates _____	<i>mm/yyyy - mm/yyyy</i>
College Attended _____		CEEB _____
Degree earned or expected _____	Dates _____	<i>mm/yyyy - mm/yyyy</i>

College Attended _____ CEEB _____

Degree earned or expected _____ Dates _____
mm/yyyy - mm/yyyy

Preferred Telephone: Home Cell Work

Name	Age & Grade	Relationship
College Attended _____		CEEB _____
Degree earned or expected _____	Dates _____	<i>mm/yyyy - mm/yyyy</i>
College Attended _____		CEEB _____
Degree earned or expected _____	Dates _____	<i>mm/yyyy - mm/yyyy</i>
College Attended _____		CEEB _____
Degree earned or expected _____	Dates _____	<i>mm/yyyy - mm/yyyy</i>

(_____) _____
 Area/Country/City Code

E-mail _____

Occupation _____

Employer _____

College (if any) _____ CEEB _____

Degree _____ Year _____

Graduate School (if any) _____ CEEB _____

Degree _____ Year _____

EDUCATION

Secondary Schools

Current or most recent secondary school attended _____

Entry Date mm/yyyy Graduation Date mm/dd/yyyy School Type: Public Charter Independent Religious Home School

Address Number & Street CEEB/ACT Code _____

City/Town _____ State/Province _____ Country _____ ZIP/Postal Code _____
 Counselor's Name (Mr./Ms./Dr., etc.) _____ Counselor's Title _____

E-mail _____ Telephone (_____) _____ Fax (_____) _____
Area/Country/City Code Number Ext. Area/Country/City Code Number

List all other secondary schools you have attended since 9th grade, including summer schools or enrichment programs hosted on a secondary school campus:

School Name & CEEB/ACT Code	Location (City, State/Province, ZIP/Postal Code, Country)	Dates Attended (mm/yyyy)

Please list any community program/organization that has provided free assistance with your application process: _____

If your education was or will be interrupted, please indicate so here and provide details in the Additional Information section: _____

Colleges & Universities

List all colleges you have attended since 9th grade, including summer schools or enrichment programs hosted on a college campus:

College/University Name & CEEB/ACT Code	Location (City, State/Province, ZIP/Postal Code, Country)	Degree Candidate?		Dates Attended mm/yyyy – mm/yyyy	Degree Earned
		Yes	No		
		<input type="radio"/>	<input type="radio"/>		
		<input type="radio"/>	<input type="radio"/>		
		<input type="radio"/>	<input type="radio"/>		

ACADEMICS

The self-reported information in this section is not intended to take the place of your official records. Please note the requirements of each institution to which you are applying and arrange for official transcripts and score reports to be sent from your secondary school and the appropriate testing agencies. Where "Best Scores" are requested, please report the highest individual scores you have earned so far, even if those scores are from different test dates.

Grades	Class Rank <small>(if available)</small>	Class Size	Weighted? <input type="radio"/> Yes <input type="radio"/> No	GPA <small>(if available)</small>	Scale	Weighted? <input type="radio"/> Yes <input type="radio"/> No												
ACT	Exam Dates: <small>(past & future)</small> mm/yyyy	mm/yyyy	mm/yyyy	Best Scores: <small>(so far)</small>	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">COMB</td> <td>mm/yyyy</td> <td style="width: 33%;">English</td> <td>mm/yyyy</td> <td style="width: 33%;">Math</td> <td>mm/yyyy</td> </tr> <tr> <td>Reading</td> <td>mm/yyyy</td> <td>Science</td> <td>mm/yyyy</td> <td>Writing</td> <td>mm/yyyy</td> </tr> </table>	COMB	mm/yyyy	English	mm/yyyy	Math	mm/yyyy	Reading	mm/yyyy	Science	mm/yyyy	Writing	mm/yyyy	mm/yyyy
COMB	mm/yyyy	English	mm/yyyy	Math	mm/yyyy													
Reading	mm/yyyy	Science	mm/yyyy	Writing	mm/yyyy													
SAT	Exam Dates: <small>(past & future)</small> mm/yyyy	mm/yyyy	mm/yyyy	Best Scores: <small>(so far)</small>	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Critical Reading</td> <td>mm/yyyy</td> <td style="width: 33%;">Math</td> <td>mm/yyyy</td> <td style="width: 33%;">Writing</td> <td>mm/yyyy</td> </tr> </table>	Critical Reading	mm/yyyy	Math	mm/yyyy	Writing	mm/yyyy	mm/yyyy						
Critical Reading	mm/yyyy	Math	mm/yyyy	Writing	mm/yyyy													
TOEFL/IELTS	Exam Dates: <small>(past & future)</small> mm/yyyy	mm/yyyy	mm/yyyy	Best Score: <small>(so far)</small>	<table style="width: 100%; border: none;"> <tr> <td>Test</td> <td>Score</td> <td>mm/yyyy</td> </tr> </table>	Test	Score	mm/yyyy	mm/yyyy									
Test	Score	mm/yyyy																
AP/IB/SAT Subjects	Best Scores: <small>(per subject, so far)</small> mm/yyyy	Type & Subject	Score	mm/yyyy	Type & Subject	Score												
	mm/yyyy	Type & Subject	Score	mm/yyyy	Type & Subject	Score												
	mm/yyyy	Type & Subject	Score	mm/yyyy	Type & Subject	Score												
	mm/yyyy	Type & Subject	Score	mm/yyyy	Type & Subject	Score												

Current Courses Please indicate title, level (AP, IB, advanced honors, etc.) and credit value of all courses you are taking this year. Indicate quarter classes taken in the same semester on the appropriate semester line.

First Semester/Trimester	Second Semester/Trimester	Third Trimester <small>or additional first/second term courses if more space is needed</small>

Honors Briefly list any academic distinctions or honors you have received since the 9th grade or international equivalent (e.g., National Merit, Cum Laude Society).

Grade level or post-graduate (PG)					Honor	Level of Recognition			
9	10	11	12	PG		School	State/ Regional	National	Inter- national
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

EXTRACURRICULAR ACTIVITIES & WORK EXPERIENCE

Extracurricular Please list your principal extracurricular, volunteer, and work activities in their order of importance to you. Feel free to group your activities and paid work experience separately if you prefer. Use the space available to provide details of your activities and accomplishments (specific events, varsity letter, musical instrument, employer, etc.). To allow us to focus on the highlights of your activities, please complete this section even if you plan to attach a résumé.

Grade level or post-graduate (PG)					Approximate time spent		When did you participate in the activity?		Positions held, honors won, letters earned, or employer	If applicable, do you plan to participate in college?
9	10	11	12	PG	Hours per week	Weeks per year	School year	Summer/School Break		
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										

WRITING

Short Answer Please briefly elaborate on one of your extracurricular activities or work experiences in the space below or on an attached sheet (150 words or fewer).

Personal Essay Please write an essay (250 words minimum) on a topic of your choice or on one of the options listed below, and attach it to your application before submission. Please indicate your topic by checking the appropriate box. This personal essay helps us become acquainted with you as a person and student, apart from courses, grades, test scores, and other objective data. It will also demonstrate your ability to organize your thoughts and express yourself. *NOTE: Your Common Application essay should be the same for all colleges. Do not customize it in any way for individual colleges. Colleges that want customized essay responses will ask for them on a supplement form.*

- 1 Evaluate a significant experience, achievement, risk you have taken, or ethical dilemma you have faced and its impact on you.
- 2 Discuss some issue of personal, local, national, or international concern and its importance to you.
- 3 Indicate a person who has had a significant influence on you, and describe that influence.
- 4 Describe a character in fiction, a historical figure, or a creative work (as in art, music, science, etc.) that has had an influence on you, and explain that influence.
- 5 A range of academic interests, personal perspectives, and life experiences adds much to the educational mix. Given your personal background, describe an experience that illustrates what you would bring to the diversity in a college community or an encounter that demonstrated the importance of diversity to you.
- 6 Topic of your choice.

Additional Information If there is any additional information you'd like to provide regarding special circumstances, additional qualifications, etc., please do so in the space below or on an attached sheet.

Disciplinary History

- ① Have you ever been found responsible for a disciplinary violation at any educational institution you have attended from 9th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in your probation, suspension, removal, dismissal, or expulsion from the institution? Yes No
- ② Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime? Yes No
[Note that you are not required to answer "yes" to this question, or provide an explanation, if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.]

If you answered "yes" to either or both questions, please attach a separate sheet of paper that gives the approximate date of each incident, explains the circumstances, and reflects on what you learned from the experience.


SIGNATURE

Application Fee Payment If this college requires an application fee, how will you be paying it?

- Online Payment Will Mail Payment Online Fee Waiver Request Will Mail Fee Waiver Request

Required Signature

- I certify that all information submitted in the admission process—including the application, the personal essay, any supplements, and any other supporting materials—is my own work, factually true, and honestly presented, and that these documents will become the property of the institutions to which I am applying and will not be returned to me. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation, expulsion, or revocation of course credit, grades, and degree should the information I have certified be false.
- I acknowledge that I have reviewed the application instructions for each college receiving this application. I understand that all offers of admission are conditional, pending receipt of final transcripts showing work comparable in quality to that upon which the offer was based, as well as honorable dismissal from the school.
- I affirm that I will send an enrollment deposit (or equivalent) to only one institution; sending multiple deposits (or equivalent) may result in the withdrawal of my admission offers from all institutions. [Note: students may send an enrollment deposit (or equivalent) to a second institution where they have been admitted from the waitlist, provided that they inform the first institution that they will no longer be enrolling.]

Signature 

Date _____
mm/dd/yyyy

Common Application member institution admission offices do not discriminate on the basis of race, color, ethnicity, national origin, religion, creed, sex, age, marital status, parental status, physical disability, learning disability, political affiliation, veteran status, or sexual orientation.

