



**PLEASE POST / DISTRIBUTE**  
**Applications due April 10, 2010**

Date: February 2, 2010

To: Darlene Snell, Clear Lake High School; Shannon Herd, Clear Creek High School; Ruth Caroccio, Clear Brook High School; Karen Sebung, Clear View Education Center; and Kathleen Gandin and Alma Block, Clear Springs High School

From: Angela Jenkins

Subject: Clear Lake Regional Medical Center Scholarship Fund

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The Clear Creek Education Foundation is pleased to announce the **NEW** annual 2010 Clear Lake Regional Medical Center Scholarship Fund. The Clear Lake Regional Medical Center Scholarship Fund will award five (5) \$1,000.00, one-time, scholarships. The scholarship is designed for 2010 Clear Creek ISD graduating senior(s) meeting the following requirements:

**Scholarship Candidate Criteria:**

1. Students intending to pursue or currently pursuing a degree in the **medical/health sciences field**.
2. Students must submit **three letters of recommendations** (*see page 3 of application for requirements*)
3. Student Students must submit a One-page essay describing any short and long-term goals you have for your future? How a college education will help you to attain your goals? How would you evaluate your general academic performance? Have you utilized educational opportunities available to you? If you have had the opportunity to participate in the CCISD health sciences programs, how have they helped you? What do you see yourself doing in ten years?
4. Must **complete the 2010 Clear Lake Regional Medical Center Scholarship Fund application**.
5. Must meet all admission requirements of the junior college, college or university they plan to attend.
6. Must provide an **official copy of high school transcript**.
7. Scholarship recipient must be willing, if asked by Clear Lake Regional Medical Center, to participate or speak at least once at the annual fundraiser that takes place each summer in support of the Clear Lake Regional Medical Center Scholarship Fund. Recipients who are unavailable could submit a written testimony of what the scholarship has meant to them that would be read at the event.

**Candidate application requirements:**

- Forms required: Completed 2010 **Clear Lake Regional Medical Center** Fund, three letters of reference, essay from student, photograph and a high school transcript.

**Due Date:**

Applications and corresponding documentation must be submitted **no later than April 10, 2010** to apply. Information should be sent interoffice to Angela Jenkins, Clear Creek Education Foundation – Whitcomb Elementary (Bldg. B) or mailed to:

Angela Jenkins  
Clear Lake Regional Medical Center Fund Scholarship Liaison  
Clear Creek Education Foundation  
P.O. Box 1631  
League City, Texas 77574

## CLEAR LAKE REGIONAL MEDICAL CENTER SCHOLARSHIP FUND APPLICATION

Date \_\_\_\_\_

Student ID number: \_\_\_\_\_

Clear Brook    Clear Creek    Clear Lake    Clear Springs    Clear View

- Photograph attached for newspaper / website / social media
- Official copy of High School transcript attached
- Essay attached (see *requirements on page 3*)
- Three letters of recommendation attached (see *requirements on page 3*)

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

City: \_\_\_\_\_ State: Texas Zip Code: \_\_\_\_\_

Birth date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Stepmother's Name: \_\_\_\_\_ Stepfather's Name: \_\_\_\_\_

Email (student): \_\_\_\_\_ Email (parent): \_\_\_\_\_

With whom do you live? \_\_\_\_\_

Names of other children in family	Age	Grade	If in college, which one?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



CLEAR LAKE REGIONAL MEDICAL CENTER SCHOLARSHIP FUND APPLICATION

Are you involved in any extracurricular activities? If so, which ones?

Four horizontal lines for writing answers to the extracurricular activities question.

Are you involved in any health science programs? If so, which ones?

Four horizontal lines for writing answers to the health science programs question.

FINANCIAL INFORMATION

What will be the approximate annual cost of your chosen college? \_\_\_\_\_

What % of the above cost will your parents pay? \_\_\_\_\_ What % of the above cost will you pay? \_\_\_\_\_

Have you filed the FAFSA form? \_\_\_\_\_

Are you applying for any other scholarships or loans? \_\_\_\_\_

If yes, indicate sponsor or institution and amount received, if any:

Table with 2 columns: COLLEGE OR SPONSOR and AMOUNT. Three rows of horizontal lines for data entry.

Father's total annual income: \_\_\_\_\_ Mother's total annual income: \_\_\_\_\_

**CLEAR LAKE REGIONAL MEDICAL CENTER SCHOLARSHIP FUND  
APPLICATION**

Semester Data: Class Rank # \_\_\_\_\_ in a class of \_\_\_\_\_ G.P.A. \_\_\_\_\_

Have you applied for admission to a college? \_\_\_\_\_

Have you been accepted? \_\_\_\_\_ Which school are you most likely to attend? \_\_\_\_\_

What field of study would you like to pursue? \_\_\_\_\_

Work experience (employer / hours per week):

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*We verify that all the information on this application is accurate.*

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Parent's Signature

**Please be sure to attach with application:**

\_\_\_\_\_ **High School Transcript**

\_\_\_\_\_ **Photograph**

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\_\_\_\_\_ **Essay:** One-page essay describing any short and long-term goals you have for your future? How a college education will help you to attain your goals? How would you evaluate your general academic performance? Have you utilized educational opportunities available to you? If you have had the opportunity to participate in the CCISD health sciences programs, how have they helped you? What do you see yourself doing in ten years?

\_\_\_\_\_ **Three Letters of Recommendation** (can be from teacher, counselor, coach, minister, tutor, administrator or anyone you work closely with and who knows you)