*James Lane Memorial Scholarship  
(Revised March 2015)

SCHOLARSHIP AWARD:
Five $1,250 scholarships will be awarded in summer 2015. Scholarships are renewable for one additional semester. **Scholarships are restricted to Midwestern State University and Vernon College.**

ELIGIBILITY:
Primary considerations in awarding the scholarship will be financial need, past academic achievement and club/community volunteer service.

Applicants must be a graduating high school senior  
OR  
Currently enrolled at Midwestern State University or Vernon College.

Applicants must have been a previous or current member of the Boys & Girls Clubs of Wichita Falls and/or be presently employed as a staff member of the Boys & Girls Clubs of Wichita Falls.

Scholarship applicants must have a minimum 2.50 high school/college GPA.

Those considered must disclose any and all educational assistance being received while on this scholarship.

The scholarship is for $1,250 per semester, based on a minimum of twelve semester hours of college classes or a comparable amount of vocational school work. This scholarship is renewable for one additional semester, based on a successful prior semester (minimum GPA – 2.25).

The Scholarship Committee will review all applications and determine those applicants most suitable for interviews and scholarship consideration. In person interviews will **not** be rescheduled due to scholarship applicant conflict. No phone interviews will be conducted.

*This scholarship was established by the Mavericks, a local community service organization, and the Wichita Falls Boys & Girls Club Alumni Association in memory of James Lane, a tireless community volunteer leader.*

**Deadline to submit application is June 5.**

CONTACT: For further information, please contact Randy Cooper at 322.2012 or rcooper@bgcwf.org. You can also contact Chrissie Richardson at 322.2012 or crichardson@bgcwf.org  
(Adopted 6-5-08)
James Lane Memorial Scholarship Application

Information provided is used solely in determining the applicant’s eligibility for scholarship aid funds in accordance with the guidelines established by the James Lane Memorial Scholarship Committee.

DATE: ____________________________

NAME: ________________________________________________________________

Last First Middle

AGE: ______ DATE OF BIRTH: ____________

PERMANENT ADDRESS: _______________________________________________________

Street City State Zip

PERMANENT HOME E-MAIL ADDRESS: ____________________________________________

PERMANENT HOME TELEPHONE # ________________________ CELL # ______________

CURRENT SCHOOL ADDRESS: ____________________________________________________

Street City State Zip

CURRENT PERSONAL SCHOOL E-MAIL ADDRESS: _____________________________________

CURRENT SCHOOL TELEPHONE NUMBER: _________________________________________

CURRENT EMPLOYER: __________________________________________________________________

Name Address Phone

MONTHLY WAGES: ______________________

MARITAL STATUS: ________________ NUMBER OF DEPENDENTS: ________________

OWN HOME: ________ RENT: _________ RESIDE WITH PARENT(S): ____________

WHO REFERRED YOU? __________________________________________________________

WHAT HIGH SCHOOL DID/WILL YOU GRADUATE FROM?

________________________________________________

WHO WAS YOUR COUNSELOR? ______________________________________________________

ARE YOU PRESENTLY ATTENDING COLLEGE? ______________

If yes, what college attending: ______________________________________________________________________

HOW MANY HOURS ARE YOU PLANNING TO TAKE THIS FALL SEMESTER? ________________

WHAT TYPE OF WORK DO YOU PLAN TO PURSUE WHEN YOU GRADUATE? ______________________________

HAVE YOU SERVED IN THE MILITARY? ___________ If so, what branch ________________
JL SCHOLARSHIP APPLICATION

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GIVE THE NAME, RELATIONSHIP AND SPECIFY IF ADULT OR CHILD OF ALL PERSONS LIVING IN YOUR RESIDENCE:

___________________________________________________________________________________________

___________________________________________________________________________________________

WHICH BOYS & GIRLS CLUB BRANCH WERE YOU A MEMBER OF? ________________________________

WHAT YEARS (APPROXIMATELY)? ____________________________

TELL US ABOUT YOUR BOYS & GIRLS CLUB PROGRAM PARTICIPATION INCLUDING HONORS & AWARDS

___________________________________________________________________________________________

___________________________________________________________________________________________

LIST EXTRACURRICULAR AND COMMUNITY SERVICE ACTIVITIES______________________________

___________________________________________________________________________________________

FATHER’S NAME: ___________________________ Address: _____________________________

Phone: ___________________ Employed by: _____________________________

Employers address: ___________________________ Phone: _____________________________

MOTHER’S NAME: ___________________________ Address: _____________________________

Phone: ___________________ Employed by: _____________________________

Employers address: ___________________________ Phone: _____________________________

OTHER THAN EMPLOYMENT, FROM WHAT SOURCES DO YOU EXPECT TO OBTAIN FUNDS FOR COLLEGE?

Parents________ MSU________ Vernon________ Pell Grant or other Grants______________________________

Other Resources_________________________________________________________________________________

Other Scholarship Applications_________________________________________________________________________________

STATE IN DETAIL THE FINANCIAL SITUATION THAT LEADS TO YOUR NEED FOR THIS SCHOLARSHIP AID:

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________
TELL US ABOUT YOUR EDUCATION AND CAREER GOALS

__________________________________________________________________________________________________

__________________________________________________________________________________________________

I HEREBY CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

____________________________________
SIGNATURE OF APPLICANT

Return completed application to:
Wichita Falls Boys & Girls Clubs Alumni Association
1318 Sixth St.
Wichita Falls, TX 76301

WITH COMPLETED APPLICATION, PLEASE SUBMIT THE FOLLOWING:

1. Current transcript
2. One letter of Recommendation—may be from employers, teachers, clergy, community leaders or longtime friends.

*Deadline to submit application is June 5.*

(Revised March 2015)