



# **WOODY'S KIDS SCHOLARSHIP APPLICATION**

---

**NAME OF APPLICANT**

**ELIGIBILITY AND REQUIREMENTS**

To be eligible to apply for the Woody's Kids Scholarship, an applicant must meet the following qualifications:

Eligibility:

- A. Be enrolled in a high school or college for the current year.
- B. Be a current year graduating high school Senior or enrolled in college for the next year.
- C. Have a minimum of at least an 80 GPA for the first 3-1/2 years of high school, or a 3.2 college GPA.
- D. Current or previous patient at West Texas Rehabilitation Center.

Requirements:

- A. Submit a copy of the student's transcript for the first 3-1/2 years of the student's high school career or current college career.
- B. Submit a fully completed application by **May 1<sup>st</sup> of the graduation year**. Mail or fax to:

MAIL:

West Texas Rehabilitation Center  
Attn: Woody's Kids  
4601 Hartford Street  
Abilene, TX 79605

FAX: (325) 793-3583

# **WOODY'S KIDS SCHOLARSHIP**

## **POLICIES AND SELECTION PROCEDURE**

1. Recipient of the funds for the scholarship will be determined by a West Texas Rehabilitation Center Selection Committee. The amount of funds awarded each year will be a minimum of \$5,000. All funds collected in any given year do not have to be awarded and may be placed in an account to draw interest for future scholarships.
2. A scholarship may or may not be awarded each year as deemed appropriate by the West Texas Rehab Center Selection Committee. Possible reasons that would cause the scholarship to not be awarded could include, but not be limited to:
  - A. No eligible student applicants.
  - B. No eligible students planning to attend college, a university or technical school during the Fall semester immediately following graduation.
3. The Scholarship Selection Committee will consist of no less than three (3) and no more than five (5) voting members. The selection of the committee members will be by the West Texas Rehab Center Administration and may be changed yearly if it is deemed necessary.
4. All eligible students will be offered a Scholarship application.
5. All eligible student applicants will then be turned over to the Scholarship Selection Committee to be reviewed.
6. For new students, scholarship monies will be distributed to the college, university or technical school of each recipient upon the West Texas Rehab Center business office receiving verification of enrollment in the fall semester the year following graduation.
7. For current post-secondary students, scholarship monies will be distributed upon receiving verification the student is enrolled and in good standing and is registered/enrolled for the semester immediately following award of scholarship.

## GENERAL INFORMATION ABOUT APPLICANT

- |    |  |                           |              |
|----|--|---------------------------|--------------|
| 1. | _____  | _____                     | _____        |
|    | First Name   | MI                        | Last Name    |
| 2. | _____  | _____                     | _____        |
|    | Social Security Number   | Age                       | Phone Number |
| 3. | _____  | _____                     |              |
|    | High School Attended   | College Attending         |              |
| 4. | Home Address:  | _____                     |              |
|    |  | Street, Route, Box Number |              |
|    |  | _____                     |              |
|    |  | City, State Zip Code      |              |
| 5. | Parent's or Guardian Names: _____                                      |                           |              |
| 6. | Have you been accepted for admission to a college or university? _____ |                           |              |
|    | If so, where? _____  |                           |              |
|    | If no, have you made application for admission? _____                  |                           |              |
|    | If so, where? _____  |                           |              |
| 7. | What major (course of study) do you intend to pursue? _____            |                           |              |
|    | _____  |                           |              |
| 8. | My planned career is:  |                           |              |
|    | _____  |                           |              |
|    | _____  |                           |              |

## SCHOLARSHIP OR ACADEMIC ACHIEVEMENT

TOP SECTION OF THIS PAGE TO BE COMPLETED BY SCHOOL COUNSELOR OR COLLEGE ADVISOR.

1. Name of Applicant: \_\_\_\_\_
  2. **Graduating High School Senior** – Applicant's numeric rank and GPA in graduating class for the first 3-1/2 years of high school: \_\_\_\_\_  
  
Number of students in high school graduating class: \_\_\_\_\_
  3. **Current College Student** – College GPA: \_\_\_\_\_
- 

### A. VOLUNTEER EXPERIENCE AT OTHER WEST TEXAS REHAB EVENTS

<u>YEAR</u>	<u>WEST TEXAS REHAB EVENT</u>	<u>JOB</u>

## B. PATIENT EXPERIENCE AT REHAB

<u>YEAR</u>	<u>SERVICE RECEIVED</u>	<u>WHEN DISCHARGED</u>

## C. COMMUNITY SERVICE

<u>YEAR</u>	<u>PROJECT/EVENT</u>	<u>JOB</u>

## **D. SCHOOL ACTIVITIES**

*(List any school activities that you were actively involved in.)*

<b>YEAR</b>	<b>ACTIVITY</b>	<b>CHAPTER</b>	<b>DISTRICT</b>	<b>AREA</b>	<b>STATE</b>

## **E. ESSAY**

Write a one page essay about how your experience as a patient at WTRC has affected your life, and why you think you are qualified to receive the Woody's Kids Scholarship. Attach your essay to this application.