

Scholarship Application

Hereford ISD Board of Trustees Continuing Education \$500 Scholarship

Choose one:

Current HISD employee seeking teaching certification through attainment of a Bachelor's degree.

Current HISD professional employee seeking advanced certification or degree.

Applicant Information:

Full legal name: _____

Mailing address: _____

Phone number: _____ E-Mail address: _____

Current position with Hereford ISD: _____

Educational History:

High School _____ Date of Attendance _____

College: _____ Date of Attendance _____

College: _____ Date of Attendance _____

I am a ___ full-time ___ part-time college student. Expected date of graduation _____

Field of study: _____

Future career goals: _____

Volunteer and Community Activities:

Name of organization _____ Dates _____

Type of service: _____

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Type of service: _____

(If you have additional volunteer/community activities you would like to add, please do so on an attached sheet)

