



ASSISTANCE LEAGUE OF SAN ANTONIO 2020 SCHOLARSHIP PROGRAM

In the spring of 2020, Assistance League of San Antonio and its auxiliary Bexar Hugs will present \$3000 scholarships to students at a college or university in Bexar County. The intent of these scholarships is to provide financial assistance to help students reach their educational goals. The award may be used for tuition, fees, and books and will be paid directly to the college or university each student attends.

To be eligible for a scholarship, the applicant must be enrolled as a full-time student (12 hours or more), entering his/her junior or senior year at a four-year college or university in Bexar County, Texas and provide proof of economic need.

Applications must include:

- completed **Assistance League of San Antonio Scholarship Application** that may be obtained from your school financial aid office or downloaded from the Assistance League of San Antonio website: www.assistanceleague.org/san-antonio. (Click heading PROGRAMS then click Scholarships.) The forms there may be printed.
- **Biographical letter** that is one, typed, single-spaced page and includes personal information you choose to share about your family background, financial needs, and educational goals.
- **Proof of enrollment or letter of acceptance** from a four-year college or university in Bexar County and dates of attendance.
- **Minimum of three (3) letters of recommendation:** two (2) from professors/administrators and one (1) from other school personnel or employers. Recommendations from family or personal friends will ***NOT*** be accepted.
- **Official undergraduate transcript**, including most recent semester completed.
- Copy of current **tax return**.

Information contained in this application remains confidential.

**APPLICATIONS MUST BE POSTMARKED
BY THURSDAY, APRIL 30, 2020**

Please submit completed application packets to:

Assistance League of San Antonio
Attention: Scholarship Chairman
P.O. Box 13130
San Antonio, TX 78213

or digitally at

scholarships.alsa@gmail.com

Incomplete or late applications will not be considered.

Assistance League of San Antonio is a 501(c)(3) non-profit organization

Name of Applicant _____

FINANCIAL INFORMATION:

Who is responsible for financing your further education? _____

Applicant's Gross Annual Income \$ _____

Spouse's Gross Annual Income \$ _____

Family Assistance \$ _____

Applicant's Employment History (Begin with most recent):

Name of Business	Position	Hours per Week	Dates Employed
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

How much money will you need for college next year? Tuition \$ _____

Required Fees \$ _____ Books and Supplies \$ _____

Please list other financial resources and specify name and amount of each:

Scholarships \$ _____

Grants \$ _____

Student Loans \$ _____

Trusts, educational IRA's or other funding \$ _____

Please specify and explain any unusual family financial circumstances or expenses that you anticipate during the coming scholastic year.

Certification and Authorization:

I declare that the information reported is true, correct, and complete.

Applicant's Signature _____

Spouse's Signature, if applicable _____