

**2020 NTCA Scholarship Application**

***Must be e-mailed by February 15, 2020, on/before 11:59pm to ntcascholarship@ntca-online.com.***

NTCA awards scholarships are based on both ***Academic Excellence*** and/or ***Financial Need***.

**Please circle which scholarship you are applying for: Academic Excellence Financial Need Both**

**Personal Data**

Name

Address

City, State, Zip

Phone Date of Birth Age

Social Security # Email

Are you employed? If yes, where and length of time with that employer?

Father’s Name

Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Income \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if different from above)

City, State, Zip Phone

Mother’s Name

Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Income \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if different from above)

City, State, Zip Phone

Number of siblings Are any involved in colorguard/perc/winds?

Age(s) and Grade(s) of siblings

Any siblings in college? If so, how many?

Where do your siblings attend college?

**Education**

High School

City & State Year in School

GPA \_\_\_\_\_\_\_\_\_\_ out of \_\_\_\_\_\_\_\_\_\_

College (if applicable)

City & State Course of study

GPA \_\_\_\_\_\_\_\_\_\_ out of \_\_\_\_\_\_\_\_\_\_

Course Load (list all current classes):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**NTCA Unit Information**

What unit are you performing with in 2020?

How long have you been a member of that unit?

What other units have you performed with?

**Answer the following** (Limit responses to 200 words. Essays must be typed; attach to application prior to e-mailing):

1.) Academic progress: Please describe any extenuating circumstances and/or challenges overcome in your academic endeavors.

2.) Extracurricular activities: Please describe your involvement in all scholastic, recreational, and civic activities including performing arts both in and outside of school. Identify accomplishments and responsibilities for these activities.

3.) Future plans: Please describe your plans and goals for post-high school education. Where do you see yourself in five years?

4.) Why do you want or need this scholarship?

**I certify that the above and enclosed information is complete and true.**

Applicant’s Signature

Date

I have reviewed the above information and recommend this member for the NTCA Scholarship.

Unit Director’s Signature

Unit

Date

**Please Enclose:**

* High School Transcript (including explanation of system, i.e. 4 point, etc.; please scan and attach to application)
  + If institution needs to mail:
    - **NTCA, Attn: Scholarship Committee, PO Box 181404, Arlington, TX 76096**
* Current Photograph (please scan and attach to application)
* Official College Transcript (if applicable-please scan and attach to application)
  + If institution needs to mail:
    - **NTCA, Attn: Scholarship Committee, PO Box 181404, Arlington, TX 76096**
* Two letters of recommendation from individuals ***other than your Unit Director*** – one must be from a current teacher and one from a personal reference. Please scan and attach to application.
  + If individual needs to mail:
    - **NTCA, Attn: Scholarship Committee, PO Box 181404, Arlington, TX 76096**

***If selected, recipient must designate the institution for scholarship by September 1st, 2020.***

**Please direct questions to:**

Scholarship Committee Chair

ntcascholarship@ntca-online.com

**Please e-mail completed Scholarship Applications to:**

ntcascholarship@ntca-online.com

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***ALL SCHOLARSHIP APPLICATIONS WILL REMAIN CONFIDENTIAL***