



Randy L Wendt Foundation Scholarship Renewal Application

Application requirements for Randy L Wendt Memorial Scholarships

1. The applicant must be a current college student OR
2. The applicant must be a high school/college dual credit student.
3. The applicant must be a child, grandchild, sibling, parent or spouse of a murder victim with the victim having not been involved in the commission of a crime at the time of death
4. The applicant must maintain a 2.5 cumulative grade point average
5. The applicant must not have been previously convicted or served a term of deferred adjudication for any Class A or B Misdemeanors or Felony charges.
6. The applicant must have previously been awarded a Randy L Wendt Memorial Scholarship within the last 12 calendar months. If not, the applicant must apply using the Scholarship application for new applicants.

Any funds awarded will be deposited at the school, not given directly to the student.



PERSONAL INFORMATION

LAST NAME:

FIRST NAME:

PERMANENT STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

PRESENT STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

HOME PHONE:

CELL PHONE:

EMAIL
ADDRESS:

DATE OF BIRTH: SOCIAL SECURITY NUMBER: Name of person if we are unable to contact you

Secondary contact person's email address and phone number	CAN YOU PASS A DRUG TEST?	YES NO	ARE YOU A US CITIZEN?	YES NO
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SINCE YOUR LAST APPLICATION, HAVE YOU BEEN CONVICTED OR SERVED A TERM OF DEFERRED ADJUDICATION FOR A CLASS A OR B MIDMEANOR OR A FELONY CHARGE? (Do not include Class C Misdemeanors)

YES NO

IF YES,
PLEASE LIST
ALL CHARGES,
DATES AND
DISPOSITIONS:

WHEN WAS THE LAST TIME YOU RECEIVED THIS SCHOLARSHIP?

FALL SUMMER 1	MID-WINTER TERM SUMMER 2	SPRING
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FAMILY AND FINANCIAL INFORMATION

Is anyone other than yourself financially responsible for your tuition or books?

YES NO

IF YOU ANSWER "YES", PLEASE ANSWER THE FOLLOWING QUESTIONS:

Name and relationship of responsible person(s):

Approximately how much of your tuition does the responsible person(s) pay? (dollar amount or %)

How many other individuals in your family will be applying for this scholarship?
(approximate answer is ok)

If applicable, how many other individuals are in your family who will be of college age or high school dual credit age within the next 7 years?

ARE YOU FINANCIALLY RESPONSIBLE FOR YOURSELF?

CURRENT
EMPLOYMENT

ARE YOU EMPLOYED PART TIME OR FULL TIME?		NUMBER OF HOURS WORKED PER WEEK:
PART TIME	FULL TIME	

YOUR INCOME
PER MONTH:

MARITAL STATUS:	SINGLE	MARRIED
	DIVORCED	WIDOWED
	CO-HABITATION	

IF MARRIED OR CO-HABITATING, PLEASE ANSWER THE FOLLOWING QUESTIONS:

SIGNIFICANT OTHER'S FULL NAME:

SIGNIFICANT OTHER'S EMPLOYMENT:

SIGNIFICANT OTHER'S INCOME:

IS YOUR SIGNIFICANT OTHER ALSO A STUDENT?

YES NO

UNUSED AMOUNT SAVED FOR COLLEGE:

Projected cost of tuition and fees for the next semester

Approximately how many textbooks will be required for the next semester?

ARE YOU PRESENTLY APPLYING FOR ANY OTHER SCHOLARSHIPS OR FINANCIAL AID?

YES

NO

IF YES, LIST EACH TYPE OF AID FOR WHICH YOU HAVE APPLIED:

LIST ALL TYPES AND AMOUNTS OF AID YOU HAVE ALREADY BEEN AWARDED:



EDUCATION

NAME OF
SCHOOL
CURRENTLY
ATTENDING:

STREET
ADDRESS:

CITY:

STATE:

ZIP CODE:

FIRST
ATTENDED:

LAST ATTENDED:

CURRENT COLLEGE LEVEL CLASSIFICATION:

CURRENT MAJOR, IF KNOWN

CURRENT
G.P.A.:

NAME OF
SCHOOL:

STREET
ADDRESS:

CITY:

STATE:

ZIP CODE:

FIRST
ATTENDED:

LAST ATTENDED:

GRADUATED:

G.P.A.:

ACTIVITIES AND AWARDS

Please list all outside activities in which you have participated or awards and recognitions you have received. This can include athletics, dramatics, music studies, school publications, school clubs or offices, volunteer work, honors and/or special recognitions. Use a separate sheet of paper if necessary.

Activity or

Recognition:

SEMESTER PARTICIPATED:

FALL

MID-WINTER TERM

SPRING

SUMMER 1

SUMMER 2

BRIEF
DESCRIPTION
OF YOUR
ROLE AND
APPROXIMATE
DATES:

Activity or
Recognition:

SEMESTER PARTICIPATED:

FALL	MID-WINTER TERM	SPRNG
SUMMER 1	SUMMER 2	

BRIEF
DESCRIPTION
OF YOUR
ROLE AND
APPROXIMATE
DATES:

ADDITIONAL INFORMATION

SEMESTER FOR WHICH YOU ARE APPLYING FOR THIS SCHOLARSHIP:

FALL	MID-WINTER TERM	SPRING
SUMMER 1	SUMMER 2	

Scholarship for which you are applying

Tuition and fees	Textbooks	Tuition, fees and textbook	High school dual credit classes
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How many classes do you plan to take this semester?

Name of school you plan to attend:

Financial Aid or business office address

City:

State: Zip code:

Financial aid or business office contact phone number

Date tuition is due if known

WHAT IS YOUR STUDENT ID NUMBER?

IN THE PAST YEAR, HAVE YOUR EDUCATIONAL GOALS CHANGED? HOW WILL THIS SCHOLARSHIP AFFECT THE MEETING OF THOSE GOALS? (Attach separate sheet if necessary)

Please attach the following supplemental information:

1. *Copy of current school transcript, to include most recent grades*

Other supplemental information may be requested.

If approved for a Tuition Memorial Scholarship, you must provide a copy of your tuition bill. If approved for a Textbook Memorial Scholarship, you must provide a list of textbooks, including Title, edition number, Author, ISBN # (if available). We will purchase the textbooks on your behalf and have them shipped directly to you.

Once you have uploaded your application and documents, email us for verification that we have received your application.

I hereby certify that the information I have supplied is a complete and accurate statement of my current education and financial condition. I authorize the Randy L Wendt Foundation, their employees or agents to conduct a complete and thorough investigation of my statements. I understand that this investigation could include direct verifications of all information given. It is with this understanding and acknowledgement that I formally apply for the Randy L Wendt Memorial Scholarship.

Sworn and subscribed on this date by the applicant

Signature