

Garcia Memorial Scholarship

Name _____

Your parent/guardian names _____

Address _____ Phone # _____

Years you attended Albany schools (i.e. Grades 3-12) _____

Other schools you have attended, if applicable

Activities (FFA 1-4 denotes all four years, or Band 2-4 denotes sophomore through senior years. Include all sports, band, school organizations and clubs, UIL activities.)

Offices held (FFA president 4, class president 3, student council 1-3, etc.)

Honors (include sports & band awards, DAR Good Citizen, etc.)

If you are planning to attend college/trade school:

Name of college and major

****To apply for this scholarship, please fill out this form and return to the office with your letter by April 21st****