



Ronald McDonald
House Charities®
of the Southwest



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Ronald McDonald House Charities of the Southwest Scholarship Program

The scholarship program of Ronald McDonald House Charities® (RMHC) of the Southwest is patterned after the “RMHC Scholars” program- with one important difference. In order to more closely align the scholarship program with our local Chapter’s exclusive focus on children’s health, we have added an additional criteria item which is as follows:

RMHC of the Southwest’s scholarships will be awarded to applicants who have either:

1. Had a serious childhood illness or injury
OR
2. Had a sibling who had a serious childhood illness or injury which impacted the family.

Applicants must submit the following:

1. RMHC Scholars application (www.RMHCsouthwest.com)
2. A narrative which includes information about the illness and how it has impacted the applicant and his/her family (include information about use of a Ronald McDonald House® or Ronald McDonald Family Room® if applicable).

The Board of Directors of RMHC of the Southwest know that the serious illness of a child can have a significant impact on the entire family. Not only is there the physical aspect of an illness, but there is also an emotional and financial impact that cannot be overlooked. In keeping with other programs of RMHC of the Southwest (Ronald McDonald House®, Ronald McDonald Family Rooms® and the Ronald McDonald Care Mobile®), our scholarship program now embraces our mission of offering care and support to ill or injured children and their families.

**PLEASE ADVISE YOUR HIGH SCHOOL SENIORS OF THIS IMPORTANT
SCHOLARSHIP PROGRAM.**

For additional information, contact Linda Limon at 806-744-8877

Keeping families close



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Scholarship Program Application

Applicants Demographics

First Name: _____ Middle Initial: _____ Last Name: _____

Address: _____ City: _____ State: _____ ZIP _____

Home Phone: _____ Cell Phone: _____

For Statistical Purposes Only

Ethnicity/Nationality: White Hispanic or Latino African American Asian American Indian or Alaska Native

Gender: Male Female

Are you or an immediate family member a McDonald's Employee? Yes No

Have you or a family member ever stayed at a Ronald McDonald House? Yes No

Where did you stay? City: _____ State: _____

Have you or a family member ever volunteered at a Ronald McDonald House or Family Room? Yes No

Are you a first-generation student to attend college? Yes No

How did you hear about the Ronald McDonald Scholarship? Guidance Counselor Website
 Scholarship Directory Other _____

Family Information

Applicant's Place of Birth: City: _____ State: _____

Guardian's Name: First Name: _____ Last Name: _____

Relationship to Guardian: _____

Guardian's Phone Number: _____

Academics

High School Name: _____

High School Address: _____ City: _____ State: _____ ZIP _____

High School Counselor's Name: _____

High School Phone Number: _____

Academic Scores:

GPA Scale: _____ GPA: _____

Is your GPA Weighted or Un-Weighted: Weighted Un-Weighted

Does your school rank students? Yes No

Class Rank: _____ Class Size: _____

Have you taken the ACT or SAT? Yes No ACT or SAT Scores: _____

Does your school offer Honors, AP, or IB programs? Yes No

Were you a part of any? (please list) _____

Institution Name: _____ Institution State: _____

Major: _____

Community Involvement/Volunteer Service

Organization	Description of Activity	Total Hours	Duration of Involvement	Are you still actively participating?

Extracurricular Activities

Description	Highest Position Held	Number of Years Involved

Work Experience (if applicable)

Employer	Position	Start Date	End Date	Average Hours Per Week

Verification of Activities

Contact Full Name	Contact Email	Contact Phone Number	Which activity will contact verify?

Financial Information:

Do you live with at least one of your parents? Yes No

Were your parent(s)/legal guardian(s) employed last year? (2016) Yes No

Marital Status of parent(s) or guardian(s)? Married Single Divorced Widowed

Do your parent(s)/legal guardian(s) receive any Federal or State Aid? Yes No

Total cash, checking, savings, and cash value or stocks (exclude 401K, IRA): _____

Total number of family members living in household and primarily supported by the reported income: ____

Special Circumstances (Optional):

Other Scholarships/Awards

Name of Scholarship/Award	Status	Possible Amount

Essays (500 words or less)

What are your career aspirations?

Who is the most influential person in your life? Why?

How would you describe your character?

Share your experience on the significance and impact the childhood illness or injury had on your family.

Recommendation Information

First Name: _____ Last Name: _____

Email: _____ Phone Number: _____

Relationship to Applicant: _____

How long have you known the applicant? _____

How well do you know the applicant?

How well does the applicant challenge his or herself, manage time and utilize academic support networks?

How does the applicant lead or motivate others?

How is the applicant at understanding his or her personal strength and weaknesses?

Can you rate the applicant's community involvement and extra-curricular activities?

Overall impression, if you were making the decision to award this applicant, would you?