Films

NEVERTOOLATE

Dru Barber Memorial Scholarship Fund

Application Form

Complete and Return the Application to: NEVERTOOLATE Films Alan Barber 1304 South Sixth Austin, TX 78704 gabarber@gmail.com

Deadline: April 1 of the high school graduation year

For more information and qualifications, see the <u>Scholarship Program FAQ</u> at sixmantexas.com/scholarshipfaq.html.

Please print or type

Last Name		First Name		Middle Initial		Social Security Number			
Permanent Address:	Number/Street			City		St	State		ip Code
Date of Birth (MM/DD/YYYY) Home P		Phone Number Email Ad		dress	ress				
//.		())						
Texas High School:	Name of School			Locat	Location of School		Graduation Date		Grade Point Average
	Areas of Stud	ly/Extracı	ırricular A	ctivities					
Texas College or University:	Name of School		Locat	Location of School		Starting Semester			
	Proposed Ma	jor/Areas	of Study/	Extracurric	ular Activities	5			

Please describe why you should be considered for this scholarship (attach additional pages if necessary):

Discuss your economic needs (attach additional pages if necessary):

Please attach three letters of recommendation, with at least one from a member of your high school teaching staff, sign the application below, and send the completed application to the address listed at the top of this form.

I attest that the information I have provided on this application is complete, accurate, and true to the best of my knowledge.