THE VERNE COOPER FOUNDATION, INC.
2027 SCHOLARSHIP APPLICATION

*THIS APPLICATION MUST BE SUBMITTED BY **APRIL 20, 2027 AT 5 P.M**. AND BE COMPLETE TO BE CONSIDERED.*

APPLICANT: (Please print or type all information)

Name: _____
(Last) (First) (MI)

Mailing Address:_____
(Street) (City) (State) (ZIP)

Phone:_____ Email address:_____

Birth Date:_____ High School Attended: _____

Year of Graduation from H.S: _____ High School Class Rank: _____

If currently attending college, provide name of institution _____

Expected Year of Graduation from College: _____ College Hours Completed (if any): _____

Are you presently employed? _____ Name of employer: _____

What is your average gross income? _____ per week ___ per month ___

Do you plan to work while attending school? _____ If yes, where? _____

Will you live at home or live in a dorm or apartment? Live at home: ____ Live in dorm or apartment: ____

What is your anticipated degree and major: Degree: _____Major: _____

Number of Hours that you intend to enroll during the upcoming school year: Fall: _____ Spring: _____

Please list colleges or technical schools you are considering in order of preference and indicate status of application:

	Applied?	Accepted?
1. _____	Yes ____ No ____	Yes ____ No ____
2. _____	Yes ____ No ____	Yes ____ No ____

HOUSEHOLD INFORMATION:

Head of Household: _____ Occupation: _____
(name)

Relationship to Applicant: _____ Total number of persons in household: _____

Ages of persons in household: _____

Number in persons in household expected to attend college during the upcoming school term: _____

Additional Information Requested on Back

The Verne Cooper Foundation Scholarship Application

Household Gross Income Range (Annual-Use gross income amount from the prior year income tax return)

☐ Below $25,000

☐ From $25,001 to $50,000

☐ From $50,001 to $75,000

☐ More than $75,000

Other Information:

For High School Seniors Only:

SAT Total Score: _____ Date Taken:_____

ACT Composite Score: _____ Date Taken: _____

For Applicants with College Credit Only:

Cumulative College GPA: _____

Important Note: A **transcript** (not grade report) must be included with the application unless you have not been a student within the preceding three years. For high school seniors, include a high school transcript. For other applicants who have attended college within the most recent three years, include a current transcript. If you attended college in the fall term of the current school year, the transcript must include your fall grades.

Optional Personal Statement: Please note in an attachment any special circumstances or additional information about yourself which you believe should be considered.

References:

	Name	Address	Phone Number
1.	_____	_____	_____
2.	_____	_____	_____

Applicants Signature: _____ Date: _____

Completed Application May Be Mailed or Delivered to the Address noted Below but Must Be Received On or Before April 20, 2027 at 5 P.M. We recommend submitting the application by email or fax to ensure the application is received by the due date.

The Verne Cooper Foundation, Inc.
c/o Steve Mohundro
1400 W. Russell, Bonham Texas 75418
903-583-5574 (FAX 903-583-9453)
smohundro@vernecooper.org

Checklist for Application to be considered by Scholarship Committee:

1. **Application must be received at Foundation's office on or before April 20, 2027 at 5 P.M.**
2. **Application must be complete.**
3. **Application must be signed by applicant.**
4. **Transcript (not grade report) must be included.**