

# OUTLAW OUTDOORS RILEY CARTER MEMORIAL SCHOLARSHIP

DEADLINE FOR APPLICATION: APRIL 1, 2020

Applicants must meet the following criteria:

- Be graduating in 2020
- Qualify for the SETX High School Fishing Association Championship in 2020
- Have a minimum overall grade point average of B (3.0 grade-point average on a 4.0 system or equivalent)
- Have been accepted for admission to an accredited college, vocational/technical school or other institution of higher learning
- Must join a collegiate fishing team in the Fall of 2020

To be considered, applications must be typed, or printed neatly in black ink, and all requested information must be returned to **Outlaw Outdoors P.O. Box 6405 Huntsville, Texas 77342 on or before April 1, 2020**. Failure to follow these guidelines will cause your application to be disqualified.

Applicants must obtain and return with the completed application:

1. Current high-school transcript showing total enrollment in graduating class, rank, and grade point average
2. Copy of SAT or ACT score
3. Copy of letter of acceptance from an accredited college, vocational/technical school, or other institution of higher learning
4. At least one recommendation from high school academic teachers (pages 6 and 7 of this application) sealed in envelopes marked "Confidential"
5. At least one letter of recommendation from a high school fishing coach or advisor (page 8 of this application) sealed in an envelope marked "Confidential"

# **Outlaw Outdoors Riley Carter Memorial Scholarship Application**

Full Name of Applicant:

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Name of High School:

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Home Address:

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Home Telephone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Parents' Names: \_\_\_\_\_

Parents' Address:

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Employment of Father:

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Employment of Mother:

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Number of older brothers and sisters: \_\_\_\_\_ List their ages: \_\_\_\_\_

Number of younger brothers and sisters: \_\_\_\_\_ List their ages: \_\_\_\_\_

Number of brothers and sisters attending colleges, etc., next year: \_\_\_\_\_

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School Related Fishing Activities List with dates of participation. Attach an additional sheet if necessary.

List other high school organizations, extracurricular activities, honors or special recognitions, church and community activities, and dates of participation. Attach an additional sheet if necessary.

Check one below to verify your academic standing at your high school:

\_\_\_\_\_ Top 10%      \_\_\_\_\_ Top 25%      \_\_\_\_\_ Top 50%

My SAT Score: \_\_\_\_\_ My ACT Score \_\_\_\_\_

Anticipated graduation date: \_\_\_\_\_ From \_\_\_\_\_ High School

Anticipated enrollment date: \_\_\_\_\_ at \_\_\_\_\_ Name of School or College

Planned major course of study: \_\_\_\_\_

Projected number of years for completion: \_\_\_\_\_

Describe future plans and career goals:

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## **Financial Information**

List other scholarships for which application has been made; show amounts and whether or not they have been granted:

List work experiences, showing dates, rates of pay, and description of duties:

Estimated cost of tuition and fees for first year of college \$ \_\_\_\_\_

Provide a paragraph explaining your financial need, and include any/all resources available to you. List other scholarships (name and amount) you have applied for and/or already received. Add additional pages if needed.

We have examined this application and find it to be accurate and complete.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Fishing Coach/Advisor

\_\_\_\_\_  
Date

# **Outlaw Outdoors Riley Carter Memorial Scholarship Application**

## **STATEMENT OF UNDERSTANDING AND RESPONSIBILITIES (This copy to be returned with application.)**

If granted this scholarship, I pledge that I will:

1. Provide the Outlaw Outdoors, at least one month before enrollment, with the mailing address of the Financial Aid Office of the institution I will attend, as well as proof of registration and class schedule.
2. Furnish a copy of the following, immediately upon receipt, to Outlaw Outdoors:
  - a. Any interim grade-deficiency report.
  - b. Grade reports received at the end of each semester for which this scholarship is in effect. (Due within 2 weeks of receiving grades.)
3. Keep the Outlaw Outdoors advised of any change of address or telephone number.

**I understand that half the scholarship funds will be deposited with the financial Aid Office of the institution in which I am to be enrolled for the first semester and that a copy of my grades must be furnished to the Outlaw Outdoors before funds are advanced for the second semester.**

I understand that communications pertaining to this scholarship are to be mailed to the

**Outlaw Outdoors Riley Carter Memorial Scholarship at P.O. Box 6405 Huntsville, TX 77342-6405**

I understand that the Outlaw Outdoors reserves the right to withdraw this scholarship, or any unfounded portion of it, for the following reasons:

- a. If the applicant is enrolled for fewer than 12 semester hours.
- b. If the applicant withdraws from the institution.
- c. If the applicant's grade reports are not submitted in a timely manner.
- d. If the applicant's grade-point average for the first semester is below 2.5 on a 4.0 scale or equivalent.
- e. If the applicant, fails to join a collegiate fishing team

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

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## **STATEMENT OF UNDERSTANDING AND RESPONSIBILITIES (This copy to be retained by applicant)**

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- e. If the applicant, fails to join a collegiate fishing team

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

# **Outlaw Outdoors Riley Carter Memorial Scholarship Application**

ACADEMIC TEACHER RECOMMENDATION

THIS FORM IS TO BE SEALED IN AN ENVELOPE MARKED "CONFIDENTIAL" AND RETURNED TO THE APPLICANT.

Student's Name: \_\_\_\_\_

Class: \_\_\_\_\_

Does this student have the ability, desire, and motivation for education beyond the high-school level, and do you think this student is deserving of a scholarship? Please include other comments you believe to be pertinent to this student's application for scholarship funds.

\_\_\_\_\_  
Signature of Teacher

\_\_\_\_\_  
Date

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Class: \_\_\_\_\_

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\_\_\_\_\_  
Signature of Teacher

\_\_\_\_\_  
Date

THIS FORM IS TO BE SEALED IN AN ENVELOPE MARKED "CONFIDENTIAL" AND RETURNED TO THE APPLICANT.



# **Outlaw Outdoors Riley Carter Memorial Scholarship Application**

FISHING COACH/ADVISOR RECOMMENDATION

THIS FORM IS TO BE SEALED IN AN ENVELOPE MARKED "CONFIDENTIAL" AND RETURNED TO THE APPLICANT.

Student's Name: \_\_\_\_\_

Does this student have the ability, desire, and motivation for education beyond the high-school level, and do you think this student is deserving of a scholarship? Please include other comments you believe to be pertinent to this student's application for scholarship funds.

\_\_\_\_\_  
Signature of Coach/Advisor

\_\_\_\_\_  
Date

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