



109 Roya Lane / P. O. Box 261  
Bryant, AR. 72022  
(501) 847-4702

## **COLLEGEVILLE ALUMNI KATIE THOMAS MEMORIAL SCHOLARSHIP**

### ***Criteria***

1. Collegeville Elementary Alumni.
2. Students must have a 2.75 cumulative GPA at the end of the first semester of their senior year.
3. Students must be on schedule to graduate with their class.
4. Financial need will be a consideration.
5. Community service will be a consideration.
6. Students must be from the Bryant School District but do not have to be in the public school system.
7. Preference is given to those students choosing to attend Arkansas schools.

### ***Scholarship Amount***

This scholarship provides a one-time award of \$500.00, issued as a check addressed to the student.

### ***Pick-Up Details***

The awarded scholarship check must be picked up by the recipient in person at the Chamber office between July 1st to August 27, 2026. **NOTE:** If the check is not picked up by August 27, 2026, by 4:30pm, the scholarship will be voided.

### ***Application Procedure:***

*The application deadline is **Monday, March 16<sup>th</sup>, 2026.***

***Application must be returned to the counselor's office or Bryant Chamber office by 3:30 pm.***

***No exceptions!***

**KATIE THOMAS MEMORIAL SCHOLARSHIP APPLICATION**  
**Collegeville Elementary Alumni**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

GPA: \_\_\_\_\_

ACT Score: \_\_\_\_\_

SAT Score: \_\_\_\_\_

Name of parents/guardian with whom you live: \_\_\_\_\_

Contact information for parent/guardian: Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Place of employment: Mother: \_\_\_\_\_ Position: \_\_\_\_\_

Father: \_\_\_\_\_ Position: \_\_\_\_\_

Persons living in the home: Parents \_\_\_\_ Brothers \_\_\_\_ Sisters \_\_\_\_ Others \_\_\_\_\_

Are any of your siblings currently attending college? \_\_\_\_\_

If so, where are they at college? \_\_\_\_\_

Is financial assistance necessary for you to further your education? \_\_\_\_\_

If yes, why? \_\_\_\_\_

\_\_\_\_\_

Which college/technical school/university do you plan to attend? \_\_\_\_\_

\_\_\_\_\_

Have you been accepted? \_\_\_\_\_ What do you plan as your major? \_\_\_\_\_

What profession? \_\_\_\_\_

What other scholarships have you received or anticipate receiving?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List any activities, special recognition, volunteerism, and community service hours during your high school years:

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Statement of Purpose for Future: \_\_\_\_\_

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Is there any other information you would like the scholarship committee to know about you?

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**Additional Attachments:**

Attach a seven (7) semester transcript and documentation of participation in community service activities and school activities.

Attach two letters of recommendation.

\* One as a school reference

\* One as a community reference

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

***NOTE: IF THE APPLICATION IS NOT COMPLETED OR THE REQUIRED DOCUMENTS ARE NOT PROVIDED, THE APPLICATION WILL BE ELIMINATED FROM ELEGIBILITY.***