

Raymond R. Thomas M.D.
Memorial Scholarship
APPLICATION

This scholarship has been established as a memorial to the life of Dr. Raymond Thomas, Sr., of Eagle Lake, Texas. The purpose of this scholarship is to train paramedics in a two-year course of study toward an Applied Associate Science degree in Emergency Medical Technology. This scholarship will pay the recipient up to \$1500 per semester for tuition, fees and books and other expenses approved by the Fund Treasurer. The recipient may attend any accredited paramedic program. Applicants must be prepared to commit to the entire two-year term.

Applicants will be judged by the fund foundation Board of Directors with the assistance of faculty and administration of respective high schools. Applicants will be judged on the basis of grades, college entrance exam scores, rank in class, participation in school and community activities and the applicant's written commitment to the two-year program. Where several applicants are judged equal based on these criteria, first priority will be given to graduates of Rice High School and second priority to graduates of other high schools in Colorado County; however, graduates of any other accredited high school are eligible to apply for this scholarship. Applicants with a GED may apply by requesting an application from any Colorado County High School or from one of the addresses below.

Questions should be directed to Victor Scott, 407 N. Walnut, Eagle Lake, TX 77434 (979/234-2792) or Jonna Bowen, 403 N. Walnut, Eagle Lake, TX 77434 (979/234-7589).

NAME _____ HIGH SCHOOL _____
 First Middle Last

MAILING ADDRESS _____ PHONE _____

CITY _____ ZIP _____ BIRTH DATE _____

YOUR E-MAIL ADDRESS _____ DRIVERS LICENSE # _____

PARENT'S NAME _____ ADDRESS _____

LIST ACTIVITIES PARTICIPATED IN DURING HIGH SCHOOL AND ANY OFFICES HELD _____

(CONTINUE ON BACK IF NECESSARY)

LIST COMMUNITY (or outside school) ACTIVITIES PARTICIPATED IN _____

(CONTINUE ON BACK IF NECESSARY)

PAGE 2, THOMAS SCHOLARSHIP

COLLEGE ENTRANCE EXAM SCORES

ACT: English _____ Math _____ Reading _____ Sci. Reasoning _____ Composite _____

SAT: Critical Reading _____ Math _____ Writing _____ Total _____

THEA: Reading _____ Math _____ Writing _____ Exempt _____

ATTACH A COPY OF YOUR HIGH SCHOOL TRANSCRIPT SHOWING YOUR COMPLETE HIGH SCHOOL GRADES THROUGH YOUR LAST COMPLETE SEMESTER OF SCHOOL. IF THE TRANSCRIPT DOES NOT SHOW YOUR GRADE POINT AVERAGE AND STANDING IN YOUR CLASS AS OF THAT SEMESTER, FILL IN THAT INFORMATION BELOW AND HAVE IT VERIFIED BY THE SIGNATURE OF YOUR HIGH SCHOOL COUNSELOR OR PRINCIPAL.

G.P.A. _____ RANK IN CLASS _____

I certify that the above information is correct: _____
(PRINCIPAL or COUNSELOR)

ATTACH TWO LETTERS OF RECOMMENDATION TO THIS APPLICATION FROM FACULTY, ADMINISTRATION OR MEDICAL PROFESSIONAL.

USE THE BACK SIDE OF THIS PAGE TO EXPLAIN WHY YOU WOULD LIKE TO RECEIVE THIS SCHOLARSHIP AND YOUR COMMITMENT TO THE TWO-YEAR COURSE OF STUDY, IF WITHIN YOUR ABILITIES.

SIGNATURE _____ DATE _____

(The Board of Directors would prefer to have this application turned in by March 31, so that the recipient can be named at the high school's awards presentation, but if there are no applicants by that date, applications will be accepted up until thirty days before the deadline for enrolling in the course.)

BOARD OF DIRECTORS

Victor A. Scott, President Russell Thomas, Vice-President Jonna Bowen, Secretary/Treasurer Elfe Thomas, Director