

## **Lisa Carey Memorial Scholarship**

The award is in memory of Lisa Carey, a band & color guard member at A&M Consolidated High School, Class of 2000.

Lisa's father, Dr. John Carey is the benefactor of this memorial scholarship. This scholarship is independent of any Band Booster Scholarships that may be awarded. The Scholarship will be presented to an outstanding graduating senior who has participated in the COLOR GUARD and who has successfully completed the application process. The following criteria will serve as eligibility requirements for a Lisa Carey Memorial Scholarship:

1. Serve as a member of the A&M Consolidated High School Color Guard
2. Scheduled to graduate in May of their senior year.

Scholarship applications will be scored and ranked according to the criteria points as noted on the application. Applications that are not complete or late will not be scored. Applications that are not signed will have ten points deducted from final score before ranking.

A complete scholarship application must include the following:

- Complete scholarship application form ***sealed in envelope***
- Address Scholarship Application envelope:

LISA CAREY MEMORIAL SCHOLARSHIP

### ***DEADLINE FOR SUBMISSION OF SCHOLARSHIP APPLICATIONS***

**Completed scholarship applications must be delivered to Mr. Henry by  
4:00 p.m. on March 31. *No late applications will be accepted.***

**LISA CAREY MEMORIAL  
SCHOLARSHIP APPLICATION**

**Name:** \_\_\_\_\_ **Student ID #:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** **Texas** **Zip Code:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Parent(s) or Guardian Name:** \_\_\_\_\_

**COLOR GUARD ACTIVITIES / INVOLVEMENT** (120 points)

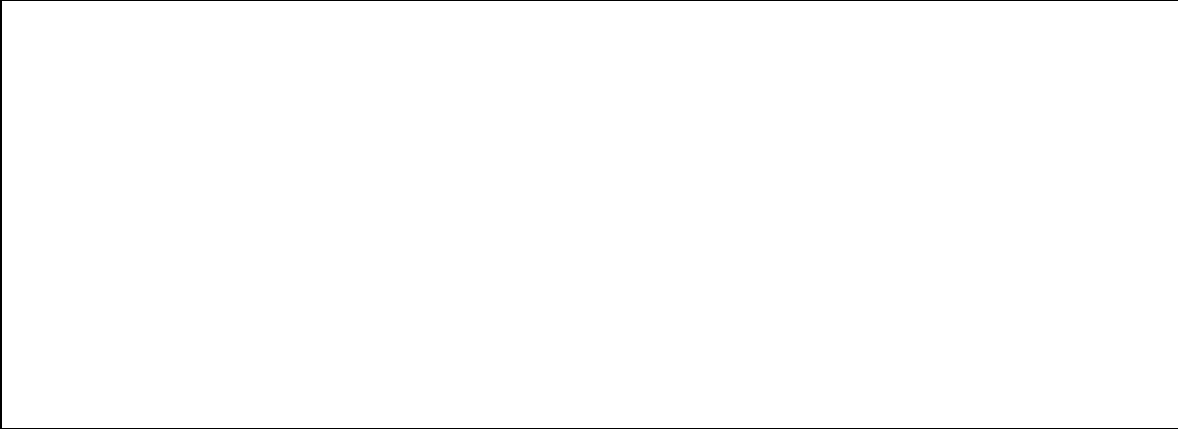
	<b>TOTAL POINTS 40</b>	<b>TOTAL POINTS 40</b>	<b>TOTAL POINTS 40</b>
	<b>FALL COLOR GUARD Member (10 pts each yr)</b>	<b>WINTER GUARD MEMBER (10 pts each yr)</b>	<b>LEADERSHIP POSITION HELD (10 pts each yr)</b>
<b>FRESHMAN</b>			
<b>SOPHOMORE</b>			
<b>JUNIOR</b>			
<b>SENIOR</b>			

I certify that the information contained within this scholarship application is correct to the best of my knowledge. I hereby agree that if I receive this scholarship, I will provide the name and address of the College/University that I will be attending so that the scholarship payment can be forwarded to the College/University of my choice.

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

\_\_\_\_\_  
Date

Why did you join the color guard? (50 points)



Why is the color guard important to the band? (50 points)



What do you plan to do after graduation? (50 points)

