

**Main Student Information** 

Guardian Signature (if applicable)

## SFA PRE-LAW ACADEMY SCHOLARSHIP

## The deadline for applying is March 15, 2026

## ELIGIBILITY

In order to be eligible for this \$875.00 scholarship you must have a family income of \$50,000 or less per year.

• Priority will be given to students who demonstrate strong academic credentials and devotion to community.

## Male $\Box$ Female $\Box$ Birth Date (m/d/y): Last: \_\_\_\_\_ MI: \_\_\_\_ Street: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_ Cell Phone: Home Number: \_\_\_\_\_ Student Email: \_\_\_\_\_ Parent Name: \_\_\_\_\_ Parent Cell Phone: \_\_\_\_\_ Parent Email: \_\_\_\_\_\_ Current High School: Graduation Date: Will student be driving and parking their vehicle at SFA? Yes $\square$ No $\square$ Parking Pass costs \$18.00 and can be paid online or by check. T-shirt Size □ Small □ Medium □ Large □ X-large □ 2X-large □ 3X-large □ 4XL Rooming: Preferred Roommate Name (if applicable): \_\_\_\_\_\_ Student Signature Parent Signature (required)

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PA on 4.0 scale, school s		<del>I</del> A, 5A):	
xpected Graduation Date	) <b>:</b>		
gh School Involvemen Organization	t: Position	Date	Responsibility
i.e. Student Council	President	2021-10	Coordinate Organization
			<u> </u>
lease attach any other organiza	tions if necessary		
onore and Awards: Include t	hase autside the sol	hool as well as w	our academic awards, such as ch
			rd if this is not apparent from its

<u>Community Activities:</u> List any involvement with civic organizations and/or service to the community. If your participation was as an individual or as a part of an organization, please name the organization.
(Example: Visiting nursing homes with XYZ organization)
Please email this application and a copy of your essay to ( <a href="mailto:prelawacademy@sfasu.edu">prelawacademy@sfasu.edu</a> ) or mail to:
CLAA – Pre-Law Academy
P.O. Box 13033, SFA Station Nacogdoches, Texas 75962
Incomplete applications will not be considered.