



P.O. Box 572 • 1115 Angelo St. • Castroville, Texas 78009
Phone (830) 538-3142 • Email: chamber@castroville.com
www.castroville.com

2024 MVIDS SCHOLARSHIP APPLICATION FORM

NAME: _____

ADDRESS: _____ **CITY** _____ **ZIP** _____

TELEPHONE: _____ **Female** _____ **Male** _____

PERSONAL EMAIL ADDRESS (not school email):

GRADE POINT AVERAGE (GPA) _____ **CLASS RANK** _____

COLLEGE/UNIVERSITY YOU PLAN TO ATTEND:

_____ **College ID#** _____

WHAT IS YOUR MAJOR GOAL IN FURTHERING YOUR EDUCATION?

WHAT IS YOUR AREA OF INTEREST? (Major if applicable) _____

PLEASE PROVIDE THE FOLLOWING ALONG WITH THIS FORM.

A. Resume:

Please attach a current resume, which includes education to date, employment record, clubs/offices held, volunteer and extracurricular activities, academic achievement/awards and civic activities.

B. January 2024 High School Transcript

C. Essay:

Explain in 200 words or less, why you want to go to college and how this relates to your life goals.

Please return your application to the to the Castroville Area Chamber of Commerce office at 1115 Angelo St. or email to chamber@castroville.com by 3 pm on Friday, April 12, 2024.

Scholarships must be used within the following school year (Fall or Spring) or it will be forfeited. Checks will be made payable to your college or university and mailed to them after August 1, 2024.