



---

## TEXTBOOK VOUCHER APPLICATION

### Important Information

1. Applicants must be enrolled full –time or part-time at a four year or at a 2 year institution.
2. Applicants must submit a current original transcript
3. Applicants must submit a typed essay of 250 words delineating his/her career goals, academic achievements, organization, employment status, and extracurricular activities.
4. **APPLICATIONS MUST BE POST MARKED NO LATER THAN FRIDAY, NOVEMBER 15, 2019.**

Caribbean Kite Festival  
15055 Fairfield Meadows Drive  
STE 130-87  
Cypress, Texas 77433

5. **APPLICATION FORMS MUST BE FULLY COMPLETED.**

**Please Note: All checks will be payable to the school**

### Personal information (please print)

Name \_\_\_\_\_  
Last First M.I Student ID Number

Address \_\_\_\_\_  
Street Telephone # E-mail address

City State Zip Date of Birth

With whom do you live? Mother \_\_\_\_\_ Father \_\_\_\_\_ Self \_\_\_\_\_ Others \_\_\_\_\_

Number of brothers and sisters living at home \_\_\_\_\_ Ages \_\_\_\_\_

---

**FAMILY INFORMATION**

Mother \_\_\_\_\_  
Last Name First M.I Occupation

Telephone: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Father \_\_\_\_\_  
Last Name First M.I Occupation

Telephone: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

**EDUCATION**

Name of College Currently enrolled \_\_\_\_\_

What is your academic Major? \_\_\_\_\_

GPA \_\_\_\_\_ Honors /Awards received \_\_\_\_\_

**FINANCES (Please list all sources)**

Have you applied for or received any scholarship? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes please list Donors \_\_\_\_\_ Total amount awarded \_\_\_\_\_

Applicants signature (if 18 years or older or Parents/ Guardian's

Signature \_\_\_\_\_

Date \_\_\_\_\_