



Please read criteria carefully.

### Eligibility ▶

#### All applicants must:

Be a U.S. citizen or a legal permanent resident with a permanent resident card or passport stamped I-551.

Have a permanent residence for 5 or more consecutive years and have a permanent address in one of the following 30 counties in Texas served:

Aransas, Bee, Brewster, Brooks, Cameron, Culberson, Duval, El Paso, Goliad, Hidalgo, Hudspeth, Jeff, Davis, Jim Hogg, Jim Wells, Karnes, Kenedy, Kleberg, La Salle, Live Oak, McMullen, Nueces, Pecos, Presidio, Refugio, San Patricio, Starr, Terrell, Webb, Willacy, and Zapata

Have earned/completed at least 12 undergraduate credit hours at a U.S. accredited college or university before applying for the scholarship. (Dual and Advanced Placement credits accepted.)

Have a minimum institution cumulative grade point average (GPA) of a 2.7 on a 4.0 scale.

Have completed a high school diploma or its equivalent before Fall 2024.

Be enrolled in a U.S. accredited 2 yr. community college (enrolled part-time or full-time) in a degree-seeking program, or a 4 yr. university undergraduate program (enrolled full-time) seeking a Bachelor's Degree, or a university graduate program (enrolled full-time) seeking a Master's, Law or Doctorate degree.

### Required Documents ▶

#### All applicants are required to submit the following documents:

- Completed Application
- Signed Certification and Release Form (last page of this application)
- Official College/University Transcript (Reflecting Fall 2023 grades or last enrolled semester grades.)
- All pages of the 2024/2025 FAFSA Submission Summary
- 1 page (minimum) Personal Statement

\*Please do not send additional documents (i.e. letters of recommendation, resumes, photos or copies of awards). All applicants are reviewed fairly and in a non-biased process which only takes the required documents into consideration.)

#### Supplemental documents required by some:

- Letter from Advisor (refer to Section 4)
- Copy of Permanent Resident Card (refer to Section 1)
- College Board AP Score Report (refer to Section 3)

### Application Deadline ▶

#### Postmark Deadline is Monday – April 1, 2024

Application and all required documents must be submitted by the postmark deadline.

Online applications and uploading abilities will become unavailable on April 1, 2024 at 5:00pm CST.

### Submission Instructions ▶

#### All documents can be mailed to:

Stars Scholarship Fund  
P.O. Box 3068  
McAllen, Texas 78502

#### Emailed to:

helpdesk@starsscholarship.org  
(All required documents, except transcripts)

transcripts@starsscholarship.org  
(Use for "Secure Electronic PDF" transcripts only)

### Contact Us ▶

#### Phone

956.627.1718

#### Website:

www.starsscholarship.org

#### Email

helpdesk@starsscholarship.org

**Please read carefully and print clearly.**
**Page 1 of 3**

 All fields are required. Applications with any missing information will not be processed.

**Section 1: Applicant Information ▼**

Full Legal Name	Last Name	First Name	Middle Initial
Other Last Name that may appear on your Educational records (i.e. maiden name)		U.S. Social Security Number - -	
Primary Email Address		Secondary Email Address (not a school email)	
<input type="checkbox"/> I understand that Stars will communicate with me via the primary email address only. It is my responsibility to check email regularly for correspondence from Stars and check junk mail for any blocked messages.			
Permanent Address within Qualifying County	Number/Street	City	State Zip Code Years at this address
Mailing Address	Number/Street	City	State Zip Code Years at this address
Cell Phone Number ( )	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Date of Birth Month/Day/Year / /
Country of Birth <input type="checkbox"/> United States <input type="checkbox"/> Mexico <input type="checkbox"/> Other	Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No* *A copy of your valid permanent resident card or passport stamped I-551 is required.		
Ethnicity For data collection only, please select one category that most closely characterizes your ethnicity. <input type="checkbox"/> African American/Black <input type="checkbox"/> American Indian <input type="checkbox"/> Asian American/Asian <input type="checkbox"/> Caucasian/White <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Other			
Do you identify as a military veteran or service member? <input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer *If yes, please indicate the terms that best describes your experience? (select all that apply) <input type="checkbox"/> U.S. Military Veteran <input type="checkbox"/> Active Duty member <input type="checkbox"/> Current or former member of the U.S. National Guard or Reserve			
Do you either of your parents identify as a military veteran or service member? <input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer *If yes, please indicate the terms that best describes their experience? (select all that apply) Father: <input type="checkbox"/> U.S. Military Veteran <input type="checkbox"/> Active Duty member <input type="checkbox"/> Current or former member of the U.S. National Guard or Reserve Mother: <input type="checkbox"/> U.S. Military Veteran <input type="checkbox"/> Active Duty member <input type="checkbox"/> Current or former member of the U.S. National Guard or Reserve			
Have you ever applied for the Stars Scholarship before? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been a recipient of the Stars Scholarship before? <input type="checkbox"/> Yes* <input type="checkbox"/> No		*If yes, how many years did you receive the scholarship?	
Have you had a sibling or parent receive a Stars Scholarship? <input type="checkbox"/> Yes* <input type="checkbox"/> No		*If yes, please provide their name: First Name Last Name	

**Section 2: Applicant History ▼**

Please select the option that best suits your funding needs: <input type="checkbox"/> I need funding for <u>both</u> Fall 2024 and Spring 2025 <input type="checkbox"/> I will be graduating in December 2024 and only need funding for Fall 2024 <input type="checkbox"/> I will be graduating in December 2024, but plan to continue the next level degree and will need funding for <u>both</u> Fall 2024 and Spring 2025				
<input type="checkbox"/> I understand that I <b>MUST</b> provide a Personal Statement (double-spaced, 12pt font). Must be a minimum of one page, typed, and address applicant's background, personal and academic achievements, academic plans, career goals, most recent community service efforts and financial need.				
High School Information	Name	City	State	Year Graduated
Were you home-schooled? <input type="checkbox"/> Yes <input type="checkbox"/> No			Type of high school completion? <input type="checkbox"/> Diploma <input type="checkbox"/> GED	
Current employment status <input type="checkbox"/> Not Employed <input type="checkbox"/> Employed Part-time* <input type="checkbox"/> Employed full-time*			If employed, please list company/business you work for?	
Your mother's highest education level?	<input type="checkbox"/> No High School <input type="checkbox"/> Some High School	<input type="checkbox"/> Diploma or GED <input type="checkbox"/> Some College	<input type="checkbox"/> Associate's Degree <input type="checkbox"/> Bachelor's Degree	<input type="checkbox"/> Graduate/Professional Degree <input type="checkbox"/> Unknown
Your father's highest education level?	<input type="checkbox"/> No High School <input type="checkbox"/> Some High School	<input type="checkbox"/> Diploma or GED <input type="checkbox"/> Some College	<input type="checkbox"/> Associate's Degree <input type="checkbox"/> Bachelor's Degree	<input type="checkbox"/> Graduate/Professional Degree <input type="checkbox"/> Unknown

**Please read carefully and print clearly.**
**Page 2 of 3**

 All fields are required. Applications with any missing information will not be processed.

**Section 3: Institution Information ▼**

Please indicate which school you will be attending for the 2024/2025 academic year. (Select only one. School indicated does not affect eligibility.)

<input type="checkbox"/> Del Mar College – Corpus Christi	<input type="checkbox"/> Texas A&M International University – Laredo	<input type="checkbox"/> University of Texas at El Paso
<input type="checkbox"/> El Paso Community College	<input type="checkbox"/> Texas A&M University – College Station	<input type="checkbox"/> University of Texas at San Antonio
<input type="checkbox"/> Laredo College	<input type="checkbox"/> Texas A&M University – Corpus Christi	<input type="checkbox"/> University of Texas – Austin
<input type="checkbox"/> Our Lady of the Lake University – San Antonio	<input type="checkbox"/> Texas A&M University – Kingsville	<input type="checkbox"/> University of Texas Rio Grande Valley
<input type="checkbox"/> Schreiner University – Kerrville	<input type="checkbox"/> Texas State Technical College – Harlingen	<input type="checkbox"/> University of Texas Health
<input type="checkbox"/> South Texas College – All locations	<input type="checkbox"/> Texas State University – San Marcos	<input type="checkbox"/> University of the Incarnate Word
<input type="checkbox"/> St. Mary’s University – San Antonio	<input type="checkbox"/> Texas Tech University – Lubbock	<input type="checkbox"/> Other*
<input type="checkbox"/> St. Mary’s University – School of Law	<input type="checkbox"/> Texas Tech HSC – El Paso	

\*If you selected “Other” above, please provide your 2024/2025 accredited institution here:

Name	City	State
------	------	-------

Are you currently enrolled at this school for the present 2023/2024 academic year?  Yes\*  No (Please list current institution next)

\*If yes, please provide your Student ID Number at this institution?

\*If you selected “no” above, please provide your 2023/2024 accredited institution here\*:

Name	City	State
------	------	-------

AP Credits Only  
*\*If you are not currently enrolled or are a high school student, please list institution from which your transcript, reflecting your earned college/university hours, will be sent. If you are a high school student who only has Advanced Placement (AP) Credits via College Board, please check the “AP Credits Only”. We will require a copy of your College Board Score Report to be sent to us.*

**Section 4: Academic Information ▼**

Student’s grade level for 2024/2025: Select One <input type="checkbox"/> Earned some college hours or 1st-year undergraduate.* *2024 High School graduates should select this option. <input type="checkbox"/> 2nd-year undergraduate/Sophomore <input type="checkbox"/> 3rd-year undergraduate/Junior <input type="checkbox"/> 4th-year undergraduate/Senior <input type="checkbox"/> 5th-year/other undergraduate <input type="checkbox"/> 1st-year graduate/professional <input type="checkbox"/> Continuing graduate/professional or beyond	Choose from the following to indicate the expected degree you will be working on during the 2024/2025 school year: Select One <input type="checkbox"/> Associate’s Degree <input type="checkbox"/> Graduate/Professional Degree <input type="checkbox"/> 1st Bachelor’s Degree <input type="checkbox"/> Other/Undecided <input type="checkbox"/> 2nd Bachelor’s Degree Expected graduation date for current degree program: Select month and note year. <input type="checkbox"/> May <input type="checkbox"/> December <input type="checkbox"/> August of 20____ List your major or field of study: Is your field of study considered a STEM (Science, Technology, Engineering and Mathematics) Program? <input type="checkbox"/> Yes <input type="checkbox"/> No
---	---

I understand that I MUST provide an OFFICIAL college/university transcript, reflecting completed hours/grades as of Fall 2023, via MAIL\*. Stars will obtain your cumulative GPA and earned hours from your official transcript. High School transcripts are not accepted.  
*\*Secure Electronic PDF Transcripts are accepted, however they must be sent directly from your college/university’s electronic delivery service. Electronic transcripts must be sent to transcripts@starsscholarship.org*

I understand that I MUST provide a copy of my completed 2024/2025 Student Aid Report (SAR) from my FAFSA application. An EFC score must be reflected and all pages of the SAR must be provided for Stars to accept it.

Will you be participating in any program that will affect your full-time status during the Fall 2024 or Spring 2025 semester, such as clinical rotations, student teaching or an internship? If you will be enrolled in one of these programs but will maintain full-time enrollment, answer “no”.  
 Yes\*  No

\*If yes, we will require a Letter from your Advisor confirming your enrollment in such a program before an exemption can be approved.

\*If yes, please tell us which semesters you will require an exemption for:  Both Fall and Spring  Fall Only  Spring Only

**Section 5: Certification and Release Form ▼**

- 1 I certify that all information on this application is complete and accurate to the best of my knowledge.
- 2 I understand that I am applying for a scholarship for the 2024/2025 academic year only, for one or both Fall 2024 and Spring 2025 semesters.
- 3 I understand that "full-time" undergraduate/community college is 12 credit hours and that "full-time" graduate is 9 credit hours. I further understand that Stars accepts "part-time" enrollment at community colleges and can make some exemptions at a minimum of 6 hours and is subject to approval.
- 4 I certify that I have read the application criteria and instructions, sections 1 - 4 and I meet all eligibility requirements as specified in this application.
- 5 I understand that I must submit an Update Request Form (available on the Stars homepage) to Stars immediately with any changes to the information I have provided on this application in regards to address, email or 2024/2025 academic information.
- 6 I understand that Stars will communicate with me via email to the email address I have provided on my application only. Furthermore, I understand that it is my responsibility to check this email address, including junk/Spam folders continually throughout the processing period.
- 7 I understand that I may only receive one scholarship administered by Stars per academic year, to be applied towards tuition costs and fees only.
- 8 I understand that in order for my application to be considered, I must submit all the required documents in the application instructions, in addition to my application, by the postmark deadline of April 1, 2024 5:00pm CST. No extensions will be given. I understand that application materials become the property of Stars and will not be returned.
- 9 I understand that Stars recommends that I keep copies of all documents dropped off, mailed and/or faxed items, as well as keep track of dates items were submitted in case the documents do not reach the Stars office.
- 10 I understand that my application will be reviewed in an objective and unbiased manner based on information provided in my application and I understand that ALL Stars decisions for recipient selections are non-negotiable and final.
- 11 I understand that Stars has limited funds and cannot and will not award every applicant that applies. Furthermore, I understand Stars will not send regret notifications and is not obligated to share the reasons I was not selected with me.
- 12 I understand that it is my responsibility to create a Stars account and log in to my account and view my status via the Stars website at [www.starsscholarship.org](http://www.starsscholarship.org) continually during the processing period to see if I was selected as a recipient or if Stars requires further documentation.
- 13 I understand that the Stars scholarship is not guaranteed to me or anyone, including past recipients.
- 14 I understand that should I be selected as a recipient, Stars will provide me with an Award Letter and a Letter of Acceptance, both of which will ONLY be posted to my Stars account. I understand that I must respond within a set deadline and I must return my forms as specified by the deadline provided to Stars. I understand it is my responsibility to ensure Stars receives my documents before the set deadline. Stars will not extend deadlines for any reason.
- 15 In addition, I understand that should I be selected as a recipient, I will be held to enrollment and GPA criteria as indicated on my award letter in order to remain a Stars Scholarship recipient.
- 16 I understand that should I be selected as a recipient, I will be asked to share a photo of myself, a quote, and social media information, in addition, I may be asked to represent Stars as a volunteer at fundraisers, as a speaker, or as a subject in marketing campaigns.
- 17 I hereby authorize Stars Scholarship Fund to utilize information about and from my scholarship application and my likeness for public relations purposes, publicity, or other scholarship opportunities.
- 18 I hereby give consent to my school to release financial or academic/enrollment information to Stars Scholarship Fund to be used to verify eligibility for this scholarship.
- 19 I hereby authorize my college/university to release all requested information above, pursuant to the requirements of the Family Educational Rights and Privacy Act (FERPA)

By signing below, I certify that I have read this application and the Certification and Release portion (1 through 19) and understand and accept all conditions.

Applicant's Name (Print): \_\_\_\_\_

Last 4 SSN Digits: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ /2024

**Mailing Address**

Stars Scholarship Fund  
P.O. Box 3068  
McAllen, Texas 78502

**Contact Info:**

Phone: 956.627.1718  
Email: [helpdesk@starsscholarship.org](mailto:helpdesk@starsscholarship.org)  
Website: [www.starsscholarship.org](http://www.starsscholarship.org)