



TEXAS IB SCHOOLS



2025 DP Scholarship application

Six (6) \$1,000 scholarships will be awarded.

To be eligible for the TIBS student scholarship a student must:

- Be an IB senior diploma candidate in a TIBS member school
- Provide a completed official TIBS scholarship application to be received by the TIBS office by the deadline of Friday, **January 10**, by 5:00pm.

The application contains four (4) parts and all parts must be completed to be considered:

1. Educational Information & Test Scores
2. Extracurricular & Volunteer Activities
3. Financial Need
4. Essay

Applicants will be evaluated on the following merit standards:

Scholarship
Leadership/Extracurricular
Service
Financial Need
Essay

General Instructions:

1. Applications must be typed or printed in black ink.
2. Incomplete & late applications will not be accepted—no exceptions!
3. A maximum of five (5) pages will be accepted. This allows for a full page for the essay and an additional page, if needed, for 'extra' room if the space provided is not enough.
4. A copy of your application (including the required essay) should be submitted in electronic form to the following email address:

Ms. Courtney Smith

courtney@texasibschools.org

****Only electronic copies of the application will be accepted****

5. Once your application has been submitted, you will receive a response within 24 business hours stating your application has been received. If you do not receive a response, please re-send the application.

Winners will be notified via e-mail no later than April 25, 2025.

(Only winners will be notified.)



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DIPLOMA PROGRAM SCHOLARSHIP APPLICATION



Six (6) scholarships will be awarded. Each scholarship is worth \$1,000.
Application must be received by 5:00pm on January 10, 2025.

Name _____
First Middle Last

Address _____
Street

City State Zip

Email Address Phone Number Date of Birth

School Information

School Name _____

School Address _____
Street

City State Zip

IB Coordinator _____
Name Email Address

Part 1: Educational Information & Test Scores

GPA: _____ Class Rank: ___ / ___ Test Scores: SAT _____ ACT _____

College Preference	Career Interests

Part 2: Extracurricular & Volunteer Activities

Please list, **in priority order**, the organizations, activities, jobs and internships that indicate your special contributions, talents, honors and abilities in the areas of extracurricular activities, service and work. Include service and work done in the summer. Please spell out the names and describe the organizations in which you have participated.

Information submitted on paper resumes is not considered when scholarship decisions are made. Please do not include a paper resume. Only the information below will be considered.



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Extracurricular Activities (Choose up to 5)

Organization/Activity # 1:

Description:

Year	Position(s) Held	Were you elected?	Hours/Week	Weeks/year
Freshman				
Sophomore				
Junior				
Senior				

Organization/Activity # 2:

Description:

Year	Position(s) Held	Were you elected?	Hours/Week	Weeks/year
Freshman				
Sophomore				
Junior				
Senior				

Organization/Activity # 3:

Description:

Year	Position(s) Held	Were you elected?	Hours/Week	Weeks/year
Freshman				
Sophomore				
Junior				
Senior				

Organization/Activity # 4:

Description:

Year	Position(s) Held	Were you elected?	Hours/Week	Weeks/year
Freshman				
Sophomore				
Junior				
Senior				

Organization/Activity # 5:

Description:

Year	Position(s) Held	Were you elected?	Hours/Week	Weeks/year
Freshman				
Sophomore				
Junior				
Senior				

Community or Volunteer Service (Choose up to 5)

Place of Service	Description of Service	Dates (from mm/yyyy to mm/yyyy)		Total Hours
		From: / /	To: / /	
		From: / /	To: / /	
		From: / /	To: / /	
		From: / /	To: / /	
		From: / /	To: / /	

Talent/Award/Honors (Maximum of 5)

Award/Honor/Distinction	Description/ Sponsor	Years (Fr., So, Jr., Sr)	Level (National, District, Local)



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Employment/Internships/Summer Activities (Maximum of 5)

Your Specific Role/Job Title (ex: sacked groceries or summer intern)	Employer (ex: HEB or Accounting Firm)	Hours/week	From: (mm/yyyy)	To: (mm/yyyy)

Part 3: Financial Need

Father's Information (may be biological, adoptive, or legal guardian)

Occupation: _____

Employer: _____

Mother's Information (may be biological, adoptive, or legal guardian)

Occupation: _____

Employer: _____

Total Annual Income for Father/Mother or Legal Guardian (choose one):

Below \$20,000

\$21-40,000

\$41-60,000

\$61-80,000+

Please provide information for all children under 25 years of age in your family (other than yourself):

Age	School/College/Occupation	Year in School/College	Self Supporting? (Yes/No)

_____ Check here if there are more than 5 children under 25 years of age in your family. **Do not include yourself.**

Please list, if applicable, any special circumstances that affect your family's ability to fund your college expenses:

Part 4: Essay How has your participation in the IB Program impacted your life?

(Your essay should be typed, double spaced, & no longer than one page using 12 point font.)