

*The University of Houston*  
**DELPHIAN ENDOWMENT SCHOLARSHIP APPLICATION**

**Application Deadline: March 1**  
**Application for Academic Year beginning Fall \_\_\_\_\_**

*Please Note:* The Delphian Endowment scholarships are offered only to qualifying undergraduate students who are U.S. citizens matriculating at the University of Houston for the sophomore, junior or senior year. Selection for a Delphian Endowment Scholarship is based on these factors: Scholarship, Merit, Character, and Financial Need as determined by the Delphian Scholarship Committee.

**Student Information:** **UH Student 1.D.# \_\_\_\_\_**  
**Or Social Security# if UH # unknown \_\_\_\_\_**

Name: \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number Street Apartment Number

City County State Zip Code

Contact Information \_\_\_\_\_  
Home Phone Cell Phone e-mail Address

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Are you a U.S. Citizen: Yes \_\_\_ No \_\_\_ Occupation: \_\_\_\_\_  
Are you a legal, permanent resident: YES \_\_\_ NO \_\_\_

Gender: Female Male Marital Status: Single \_\_\_ Married Number of Dependents \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Spouse's Occupation: \_\_\_\_\_

**Academic History:**

Number of college semester credit hours you will have completed at the end of current academic year \_\_\_\_\_

\_\_\_ College Classification at the **beginning of the next academic year** (check one):  
Freshman \_\_\_\_\_ Sophomore Junior Senior \_\_\_\_\_

Major Field of Study \_\_\_\_\_ Expected Graduation Date \_\_\_\_\_

\_\_\_ Semesters Needed to Graduate (**not** counting current Spring or any summer semesters) \_\_\_\_\_

Cumulative GPA for all schools attended (A=4.0, B=3.0, C=2.0, D=1.0): \_\_\_\_\_

College semester credit hours earned: at UH \_\_\_\_\_ at other institutions \_\_\_\_\_

Semesters completed: at UH \_\_\_\_\_ at other institutions \_\_\_\_\_

Parents' Information: (if applicable)

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Number Street Apartment Number

City County State Zip Code

Parents' Contact Information: \_\_\_\_\_  
Home Phone CellPhone

Please attach the following: *(applications will not be considered without the following)*

Financial Information:

Financial Statement (Delphian format)

Your current tax return

Your spouse's current tax return

Your parents' joint tax return or each of their individual tax returns for the current year if either or both is supporting student

Individual Information:

Outside Activities and Hobbies

Work Commitments

Family Commitments

Special Awards and Honors

Career Objectives

All Official Academic Transcripts from the University of Houston and all other universities and colleges attended

I understand that this application is in no way an offer of a scholarship. I hold harmless The Houston Assembly of Delphian Chapters (HADC) and the Houston Assembly of Delphian Chapters Scholarship Foundation Fund (HADCSFF) for any action it may take in regard to this application or use thereof.

*Certified Statement: I hereby acknowledge that the above information is true and correct. I agree to release any information concerning my records at the University of Houston to the Houston Assembly of Delphian Chapters Scholarship Foundation Fund necessary for the administration of the scholarship program. I also give my permission for the HADCSFF or HADC to use any photos of me for identification and/or for publicity purposes.*

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Signature of Applicant

Mail application to: Delphian Scholarship Applications  
P. O. Box 42401  
Houston, Texas 77242

Office Phone: 713 773-4380  
E-mail: [office@houstondelphians.org](mailto:office@houstondelphians.org)  
[www.houstondelphians.org](http://www.houstondelphians.org)

Houston Assembly of Delphian Chapters  
 Scholarship Foundation Fund  
 P. O. Box 42401, Houston, TX 77242

FINANCIAL STATEMENT

Dated as of: \_\_\_\_\_ Applicant's Name: \_\_\_\_\_

NAME": \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_ MARRIED\_ \_\_\_\_\_  
 SPOUSE'S NAME \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_ SINGLE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ JOINT STATEMENT\_\_ or  
 CITY, STATE, ZIP \_\_\_\_\_ INDIVIDUAL STATEMENT \_\_\_\_\_  
 EMPLOYER \_\_\_\_\_ Address \_\_\_\_\_ HOW LONG \_\_\_\_\_

| ASSETS                                  |           |
|---|-----------|
| Cash                                    | \$        |
| Marketable Securities                   |           |
| Non Marketable Securities               |           |
| Investments in Partnerships             |           |
| Real Estate ( Homestead)                |           |
| Real Estate (other)                     |           |
| IRAs, Keoghs &<br>Other qualified plans |           |
| Other Assets:                           |           |
| Personal Property                       |           |
| Automobiles                             |           |
| Notes Receivable                        |           |
| Interest in Trust                       |           |
| Misc,                                   |           |
| <b>TOTAL ASSETS</b>                     | <b>\$</b> |

| LIABILITIES                                     |           |
|---|-----------|
| Real Estate Mortgages                           | \$        |
| Note Payable                                    |           |
| Margin Debt due brokers                         |           |
| Partnership Related Debt                        |           |
| Taxes Payable                                   |           |
| Credit Card Debt                                |           |
| Other Liabilities                               |           |
|   |           |
| <b>TOTAL LIABILITIES</b>                        | <b>\$</b> |
|   |           |
| <b>NET WORTH</b><br>(total Assets -Liabilities) | <b>\$</b> |
|   |           |
| <b>TOTAL LIABILITIES</b>                        | <b>\$</b> |
| <b>+ NET WORTH</b>                              | <b>=</b>  |

| INCOME                    | ANNUAL    |
|---------------------------|-----------|
| Cash wages or salaries    | \$        |
| Commissions and Bonuses   |           |
| Partnership draws, etc.   |           |
| Partnership distributions |           |
| Interest and Dividends    |           |
| Rental Income             |           |
| Trust Distributions       |           |
| Other                     |           |
| <b>TOTAL INCOME</b>       | <b>\$</b> |

| EXPENSE                         | ANNUAL    |
|---------------------------------|-----------|
| Real Estate Mortgage            | \$        |
| Regular Scheduled Installments  |           |
| Income Taxes                    |           |
| Other Taxes (Real Estate, etc.) |           |
| Living Expenses & Misc          |           |
| Rental Expenses                 |           |
| Other Anticipated Expenses      |           |
| <b>TOTAL EXPENSES</b>           | <b>\$</b> |
| <b>NET CASH FLOW</b>            | <b>\$</b> |

*\*Form must be completed by Parents  
 if they support Student.*