

2017
BRENTWOOD COMMUNITY FOUNDATION SCHOLARSHIP
GPA FORM

Name: _____

I am applying for a Scholarship offered through the Brentwood Community Foundation Scholarship Program. One of the requirements for the application is to supply my current GPA. I give my permission for the Brentwood Community Foundation Scholarship Program to have this information. Please provide below my GPA on a 4.0 scale in the space provided. Please also send an official copy of my transcript to the Brentwood Community Foundation Scholarship Program at the following address:

Brentwood Community Foundation
Attention: Scholarship Committee
13033 Landmark
Houston, Texas 77045

GPA: _____ **(on a 4.0 scale)**

Student Signature: _____

Counselor/Registrar Signature: _____