

Texas College National Alumni Association - Houston Chapter Scholarship Program

The Texas College National Alumni Association – Houston Chapter Scholarship Program

Under the Program, one (1) \$1,000 scholarship will be awarded to an incoming freshman that has successfully obtained a diploma/GED from the Greater Houston Area. Additional scholarships may be provided for upperclassmen with provisional funding.

Program Guidelines & Priorities:

* Seeking graduating high school seniors/GED recipients from the Greater Houston Area with a record of volunteerism in the community in non-school sponsored activities and/or participation in extracurricular school activities.

* Applicants must plan to attend Texas College located in Tyler, TX.

* Scholarship funds will be paid **directly to Texas College** upon notification from the Texas College Financial Aid Office of the applicant's successful enrollment during the month of **August**.

* Applications must be received by the TCNAA-HC no later than **June 30**.

Late applications will not be accepted.

Email one copy of a completed and typed application package including application with signoff by parent/guardian if under the age of 18, essay, and letter of recommendation to scholarship@tcnaahouston.org or by postal mail to:

**c/o JOANN LIGGINS
13763 SUNMOUNT PINES DR
HOUSTON TX 77083-7387**

The applications will be reviewed and the recipient(s) selected by the scholarship committee. The scholarship will be awarded during the month of August.

Applications may be downloaded from the TCNAA-HC website at <http://www.tcnaahouston.org>

Please submit any questions that you may have to: scholarships@tcnaahouston.org

Texas College
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2019-2020 Scholarship

Please print/type your answers. Use an additional piece of paper if necessary			
1.	<table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 50%; padding: 5px;">Last Name: _____</td> <td style="border: none; width: 50%; padding: 5px;">First Name, Middle Initial: _____</td> </tr> </table>	Last Name: _____	First Name, Middle Initial: _____
Last Name: _____	First Name, Middle Initial: _____		
2.	Mailing Address: _____ _____ Street: _____ City: _____ State: _____ Zip: _____		
3.	Daytime telephone number: (_____) _____ Email address: _____		
4.	_____ Date of birth: Month Day Year		
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale)		
6.	Name and location of high school you attended/currently attend:		
7.	A. List any academic honors, awards and membership activities that you have participated in: B. List your hobbies, outside interests, extracurricular activities, and school-related volunteer activities: C. List your non-school sponsored volunteer activities in the community:		
8.	Anticipated field of study if known:		
Please check one box. If possible, one of the following must be provided to verify income: a signed statement from the individual (if dependent) or the individual's parent/guardian, verification from another governmental source, a signed financial aid application, or a signed US or Puerto Rico income tax return (IRS Tax Form 1040 Line 43, 1040A Line 27, 1040EZ line 6).			
9.	<input type="checkbox"/> \$0 - \$18,735 <input type="checkbox"/> \$18,736 - \$25,365 <input type="checkbox"/> \$25,366- \$31,995 <input type="checkbox"/> \$31,996 - \$38,625 <input type="checkbox"/> \$38,626 - \$45,255 <input type="checkbox"/> \$45,256 - \$51,885 <input type="checkbox"/> \$51,886 - \$58,515 <input type="checkbox"/> \$58,516 - \$65,145 <input type="checkbox"/> \$65,146+		
10.	Please list any other scholarships applied for and any awarded:		

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11.	Name & address of parent(s) or legal guardian(s): <i>(Include address if different than your own listed in Question 2.)</i> Name(s): _____ Street: _____ City: _____ State: _____ Zip: _____ Home phone of parents or legal guardians: _____ Cell phone: _____
12.	On a separate paper, please write an essay (250 - 500 words) addressing the following: Describe in your own words how you feel that this scholarship will benefit you in your educational endeavors.
13.	One (1) letter of recommendation from a non-family member that is familiar with you or has worked with you in the past.

AFFIRMATION OF INFORMATION ACCURACY

I hereby affirm that all the above-stated information provided by me is true and correct to the best of my knowledge and that any information found to be fraudulent shall result in the revocation of the scholarship awarded. I also consent, that if chosen as a scholarship winner, my picture may be taken and used to promote the TCNAA-HC Scholarship Program. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, according to TCNAA-HC policy, it is my responsibility to submit to the TCNAA-HC, no later than August, a certificate of enrollment for the fall semester, which includes the Student ID number and Financial Aid Office address.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of scholarship applicant: _____ **Date:** _____

Signature of Parent/Guardian (if under 18 yrs. of age): _____ **Date:** _____

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Application Checklist

Checklist:

- Application**
- Essay on a separate sheet of paper**
- One letter of recommendation**

EMAIL COMPLETED APPLICATION PACKAGE TO scholarships@tcnaahouston.org

OR BY POSTAL MAIL TO:

THE TEXAS COLLEGE ALUMNI ASSOCIATION OF HOUSTON AT:

**Texas College Alumni Association - Houston Chapter Scholarship Committee
c/o JOANN LIGGINS
13763 SUNMOUNT PINES DR
HOUSTON TX 77083-7387**

REMINDER:

Applications must be received by the Texas College National Alumni Association – Houston Chapter no later than June 30.

There will be no exceptions!