

**TARLETON STATE UNIVERSITY**  
**EMPLOYEE SPOUSE/CHILD SCHOLARSHIP APPLICATION<sup>3/4</sup> Central Texas College**

Employee Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Department/Division: \_\_\_\_\_ Campus Mail Stop: \_\_\_\_\_

As a Tarleton State University employee (budgeted 50% or more), I am requesting the Employee Spouse/Child Scholarship for the individual listed below:

**Scholarship Recipient:**

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Employee Spouse/Child Scholarships are available at the following rates per semester:

3 or more credit hours	=	\$150.00
2 credit hours	=	\$100.00
1 credit hour	=	\$ 50.00

**NOTE: An application must be submitted each semester to the Scholarship Office. In addition, the applicant can only be eligible for either the Employee Scholarship or the Employee Spouse/Child Scholarship, but not both scholarships.**

**Eligibility:**

- Must meet minimum admissions requirements.
- Must maintain an overall GPA of 2.0
- Be a student in good standing with the University.
- Cannot be on academic probation.
- **Provide proof of enrollment from Central Texas College.**

**Relationship to employee:**

Daughter \_\_\_\_\_  
 Son \_\_\_\_\_  
 Husband \_\_\_\_\_  
 Wife \_\_\_\_\_  
 Stepdaughter \_\_\_\_\_  
 Stepson \_\_\_\_\_

Semester of Request:	Due
Fall _____	<b>8/1</b>
Spring _____	<b>12/1</b>
Summer _____	<b>5/1</b>

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**APPROVED:**

\_\_\_\_\_  
Shawndi Wilson, Scholarship Director

\_\_\_\_\_  
Date