Tarleton State University Scholarship Program

For Employees Of Texas Cooperative Extension Texas Agricultural Experiment Station

Application

Employee Name:		Social Security Number:	
Agency:			
Work Address:			-
to be prorated on the employee's	\$200 for each regul \$200 for the summ percentage of full-	-time employment for the semester enrolled.	
NOTE: An application must be sub	bmitted each sem	nester to the Scholarship Office.	
 Permanent employee budgeted by name (excludes positions for which student status is required). Be eligible for benefits during the semester enrolled. Must meet minimum admissions requirements. Must maintain an overall or Tarleton GPA of 2.0 Be a student in good standing with the University. Cannot be on academic probation. 		Semester of Request: Fall Spring Summer Employment: Full-time Employment Part-time Employment Part-time Employment	
enroll in the following classes (List Book Course Prefix and Number:	elow): <u>D</u> a	ruirements described above, I am requesting permissivay(s) of Week: Times: Te missed to attend class will be made up by:	on to
Employee Signature	Date	Agency Assistant/Associate Director Da	te
Immediate Supervisor	Date	APPROVED:	
District Director/Resident Director	Date	Director of Scholarships Date Tarleton State University	