

TARRANT COUNTY'S CREDIT UNION

RETURNING UNDERGRADUATE STUDENTS Age 18-25 yrs

2019 TARRANT COUNTY'S CREDIT UNION SCHOLARSHIP FUND CONTEST APPLICATION

Last Name: _____ First: _____ Middle Initial: _____

Permanent Mailing Address: _____ Apt. #: _____

City: _____ State: _____ Zip: _____

Daytime Telephone: _____ E-mail Address: _____

Tarrant County's Credit Union Account Number: _____

Year of Your High School Graduation: _____

Name of Post-Secondary School where you are currently enrolled for the spring semester and the school where you will be enrolling in for the fall semester of 2019:

Spring Semester 2019: _____

(Include a copy of your transcript from your fall 2018 semester as proof of attendance.)

Fall Semester 2019: _____

City: _____ State: _____ Telephone: _____

___ 4-yr College/University ___ 2-yr Community or Jr. College ___ Vocational/Technical

Major (If Declared): _____ ___ Full Time or ___ Part Time

Video Scholarship Contest Information:

If you choose to submit a video, complete the following information.

Your Video Submission

Video Title: _____

Video URL: _____

Contest Agreement (Please initial)

By initialing below, you agree to the terms and conditions of the video scholarship contest.

____ I have read and understand the official contest rules. If under 18 years of age, my parent/legal guardian has given me consent to enter this contest.

____ The video I am submitting does not contain any copyrighted, inappropriate, or otherwise prohibited content.

____ I understand that in order to claim the scholarship I must enroll for the fall semester of 2019.

Applicant's Signature: _____ **Date:** _____

*****Please remember to attach a copy of your most recent transcript to this application and forward to:**

- mburleson@tccu-tx.com

OR

- **Scholarship Committee, Tarrant County's Credit Union,
200 Taylor Street, Suite 215, Fort Worth, TX 76196**