

**SPINA BIFIDA ASSOCIATION OF NORTH TEXAS
EDUCATIONAL SCHOLARSHIP FUND**

The Educational Scholarship Fund is administered by the Spina Bifida Association of North Texas so that persons born with Spina Bifida might achieve their full potential through the pursuit of higher education or technical school training. The Scholarship Fund offers assistance to persons born with Spina Bifida for such necessities as tuition, books, room and board, and specialized equipment needs.

TO QUALIFY MUST MEET THE FOLLOWING GUIDELINES:

1. Must be born with Spina Bifida.
2. Legal resident of Texas.
3. Scholarships are based on financial needs, academic record, community service, work history, leadership, and other information provided on the application.
4. Must be enrolled in, or have been accepted into a college, junior college or approved trade school.
5. A grade report or progress report must be submitted to the Scholarship Committee Chairperson following the completion of each semester or term that is funded.

There is no age limit of person applying for scholarship. Scholarships Funded will be paid directly to the recipient upon proof of acceptance to the school of choice. The Scholarship Committee is the determining factor in who is to receive the funds available and reserves the right to reject any application submitted. The amount of funds available will be a determining factor in how many scholarships are given.

CREDENTIALS REQUIRED TO SUPPORT APPLICATION FOR SCHOLARSHIP

HIGH SCHOOL STUDENTS:

1. Copy of school transcript or equivalent.
2. Letter verifying admission to school of choice.
3. Reference letter from at least one faculty member of high school.
4. A personal statement describing your goals in life, future educational pursuits and anything else you feel is helpful for the committee to know about you and your situation.

COLLEGE OR TRADE/TECH SCHOOL STUDENTS:

1. A copy of grade transcripts from each college attended.
2. Letter verifying admission to college or trade/tech school.
3. Current letter of reference from a person not related to you.
4. A personal statement describing your goals in life, future educational pursuits and anything else you feel is helpful for the committee to know about you and your situation.

Return To :

Timothy R. Nese

Spina Bifida Association of North Texas - Scholarship Program

6330 Chimney Peak Lane

Frisco, TX 75034

Please return application and all other documents required by March 15, 2017. Scholarships will be awarded in April. If you should have questions, please contact Timothy Nese at tnese@hcfsinc.com or 469-200-7036.

**SPINA BIFIDA ASSOCIATION OF NORTH TEXAS
SCHOLARSHIP APPLICATION**

Name:		
Home Address:		
Date of Birth:	Telephone ()	
email address:		
Address at School (If Applicable):		
Father's Name	Occupation	
Mother's Name	Occupation	
Siblings:		
Name	Age	
School you are planning to attend:		
Field of study:		
When do classes begin?		
What are your estimated education expenses? (Tuition and fees, books, room and board, etc.)		
How do you expect to finance your education? Have you received any other scholarships?		
Please list extra curricular activities and community activities		
Please list any jobs either part time or full time		
Name of Employer	Type of Business	Position Held

Your Signature _____

Date _____