

TCC

Texas Chiropractic College Scholarship Application

Please type or print legibly

PERSONAL INFORMATION

Name _____ Birth date _____

Email Address _____

Current Address _____

City _____ State _____ Zip _____ Phone _____

Permanent Address _____

City _____ State _____ Zip _____

Marital Status:

- Single
- Married
- Divorced
- Widowed

Citizenship:

- United States Citizen
- Eligible Non-Citizen
- Other

TCC G.P.A. _____
(Please provide most current TCC transcript)

Current Trimester _____

List of Scholarships you are Applying For: (1 application per student, please)

TCC Awards, Honors, Activities:

Please tell us how you heard about the TCC Scholarships?

- Scholar 360 TCC Backpage TCC Website Other

Previous TCC Scholarships Received:

\$ _____ Scholarship Name: _____

\$ _____ Scholarship Name: _____

\$ _____ Scholarship Name: _____

\$ _____ Scholarship Name: _____

\$ _____ Scholarship Name: _____

FINANCIAL INFORMATION

Financial Status: Independent Parent/Guardian Claims Deduction

Source of Income for a Calendar Year (3 trimesters)

Personal \$ _____ Employer _____ Hours per week _____
Spouse \$ _____ Employer _____ Hours per week _____
Parent/Guardian \$ _____
Other \$ _____
Total Income \$ _____

Assets

Vehicles (year, make & model) _____
Home/Real Estate \$ _____
Investments \$ _____

The following items must be submitted with the application:

- SAR or most recent year's income tax return
- One page essay stating why you merit the scholarship
- Unofficial TCC Transcript

Please turn in completed application and above items to Nikki Hurley in the Office of Institutional Advancement in the Harris Building, Rm 201 between 8-5 Mon-Thurs., 8-4 Fri. Applications received later than 5pm on the due date will not be considered. You will be contacted via email approximately 3 weeks after the due date to let you know the outcome of the award process. Please call 281-998-6060 or email nhurley@txchiro.edu for any questions.

I declare that the above information is correct and complete to the best of my knowledge

Applicant's Signature _____ Date _____