



Texas FFA Award Scholarship Acceptance Agreement



High School Graduation Date: _____

Award Year: _____ Award Name: _____ Amount: _____

Recipient Name: _____

Permanent Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Cell Number: _____

Social Security #: _____ FFA Chapter _____

Student E-Mail Address: _____

Parent E-Mail Address: _____

Alternate Contact Name and Phone: _____

Fill in this section ONLY if you are a graduating high school senior.

University/College in which you are enrolled: _____

Planned course of study: _____

I understand that the scholarship check will be mailed to the above institution after I have submitted all required documents via **e-mail** in **pdf or jpeg** format to the scholarship administrator at **scholarships@texasffaoundation.org** before August 1st. These required documents are:

- proof of full-time enrollment. Proof of enrollment is considered to be a copy of my official class schedule for the first college semester.
- copy of the thank you letter sent to the sponsor of this scholarship and a copy of addressed and stamped envelope (www.texasffaoundation.org >Scholarships >Award)
- Please hold** my scholarship until _____ of _____
(semester) (year)

**** I understand that I may hold the scholarship for up to 24 months *after graduation* or the receipt of the scholarship whichever comes later by requesting such to the scholarship administrator via e-mail. To hold my scholarship longer than 24 months I must submit a letter explaining why I am requesting funding to be placed on hold for more than 24 months to the Texas FFA Foundation Executive Director.**

I agree to use my Texas FFA Award Scholarship money solely for expenses at an accredited post-secondary institution. I understand educational expenses include tuition, fees, books, supplies, and room and board. I further understand that I must notify the Texas FFA Foundation of my plans to use the scholarship within one year of high school graduation, or I risk forfeiting my scholarship.

Signature of Scholarship Recipient

Date

Important Note: Keep a copy of this form for your files. If you receive this before your senior year of high school, please resubmit shortly before or after high school graduation with the information requested in the box above.