

TARRANT COUNTY'S CREDIT UNION

RETURNING UNDERGRADUATE STUDENTS Age 18-25 yrs

2024 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 2024:

Spring Semester 2024: _____

(Include a copy of your transcript from your fall 2023 semester as proof of attendance.)

Fall Semester 2024: _____

City: _____ State: _____ Telephone: _____

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

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

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