FORT WORTH SCOTTISH RITE FOUNDATION, INC.
MAJOR THOMAS A. SPENCER COMMUNITY COLLEGE SCHOLARSHIP

INTRODUCTION

The Fort Worth Scottish Rite Foundation, Inc. (the “Foundation”) is pleased to offer a scholarship program sponsored by Major Thomas A. Spencer, AUS, Retired. Each scholarship is in the amount of $750.00 per semester and may be renewable.

The scholarship is directed to students who are working while attending a community college. A community college is a public institution which awards associate degrees or certificates of completion and for purposes of this scholarship is a member of the Texas Association of Community Colleges.

APPLICATION INSTRUCTIONS

Please review this entire document before you begin completing the Application. Follow each of these instructions to complete your application.

1. Answer all questions on pages 4 and 5 of this application.
2. Assemble an Application Package in the following order. (No photos)
   a. Your completed pages 4 and 5.
   b. A copy of your current (or final) high school transcript, your GED certificate or your HSE diploma; and if applicable, your current community college(s) transcript(s).
   c. An employment verification using, or substantially like, the form on page 2 of this application.
3. Mark out all but the last 4 numbers of any Social Security Numbers on the documents in your Application Package.
4. Send the Application Package to Fort Worth Scottish Rite Foundation, Inc., P.O. Box 1320, Fort Worth, TX 76101-1320, attention of Spencer Scholarship Committee; or deliver to the Fort Worth Scottish Rite office at 1100 Henderson Street, Fort Worth.
5. Applications must be received no later than November 1 for a Spring semester, March 1 for a Summer semester, and June 1 for a Fall semester.

INTENDED RECIPIENT(S)

The ideal recipient shall:

a. Have made an application for admission to a community college or be currently enrolled in a community college for a minimum of nine (9) semester hours or equivalent;

b. Be employed an average of at least ten (10) hours per work week while taking classes at a community college;

c. Have graduated from high school in the lower 80 percentile or have earned a Texas Certificate of High School Equivalency;

d. Maintain a grade point average of at least 2.5 on any and all community college courses previously taken.
CONDITIONS

Scholarship proceeds will be sent to the community college designated by the student for administration by its office of financial aid/affairs in accordance with the terms and conditions as described in the attached sample letter (see page 3).

Application Packages will be reviewed by the Foundation. The review of completed application packages and an award of scholarship(s) is in the sole discretion of the Foundation and its representatives.

The form of the employment verification should be substantially as follows:

EMPLOYMENT VERIFICATION

Name of Employer: ____________________________________________
Address of Employer: __________________________________________
Name of Employee: ____________________________________________
Job Title and Description of Duties of Employee: ______________________
Date First Hired: ______________
Is Employee currently employed by you? (yes or no) ______________
Usual Hours of Employment: ______________________________________
Likelihood of Continued Employment (circle one): Strong Average Poor

________________________
Name and Title of Employer Representative
________________________
Signature
________________________
Date

Questions?

Call the Fort Worth Scottish Rite office at 817-335-6004 (Tuesday-Friday 8:30am to 4:30pm)
or e-mail Admin2@FortWorthScottishRite.org
Sample Letter to Institution

(Subject to Revision at Fort Worth Scottish Rite Discretion)

<< Date >>

«Financial_Aid_Office»
«FAO»
«More_Information»
«Add»
«City_State_Zip»

Re: Scholarship Grant for the << >> Semester
Name of Student: << >>
Last four digits of Student SSN: << >>
Student ID: << >>

Dear Financial Aid Administrator:

The enclosed check represents the proceeds of a scholarship awarded by the Fort Worth Scottish Rite Foundation, Inc. as a Maj. Thomas A. Spencer Scholarship to the student named above who has informed us that he will be attending your institution for the << >> semester. These funds are to be deposited in the financial aid/scholarship account for that Student. If the Student does not enroll in your institution by the end of the << >> semester enrollment period, please immediately return the funds to the Foundation.

These scholarship funds should be applied to the << >> semester of the << >> academic year. If the Student does not need the funds for the first semester/quarter, the funds may remain in the Student’s financial aid/scholarship account until he/she needs them in subsequent semesters/quarters. Should the Student withdraw from your institution with funds from this scholarship remaining in her/his financial aid/scholarship account, then such remaining funds must be returned to the Foundation.

These scholarship funds are not to be used to displace any of the following aid:
• Federal grants and scholarships
• State Sponsored grants and scholarships
• Your institution's need-based or merit-based grants/scholarships
• Other private grants and scholarships
• Work-study

The scholarship is to be used only for:
• Tuition
• Fees
• Books

This scholarship should NOT be paid out directly to the Student unless it is for reimbursement for books bought for current classes.

If these funds cause the Student to be over awarded through grants and other scholarships, please return the funds to the Foundation. If the conditions in this letter are not acceptable to your institution, please contact the undersigned before any disbursement of these funds.

Please direct all correspondence to me at the above address and telephone number. If you have questions or concerns, please contact me at the above office or by email at admin2@fortworthscottishrite.org.

Very truly yours,

James A. Rogerson,
President

Copy to: << scholarship recipient >>
The MAJOR THOMAS A. SPENCER Scholarship
FORT WORTH SCOTTISH RITE FOUNDATION, INC.

Application

Return the application and all required material to Fort Worth Scottish Rite Foundation. Mail to P.O. Box 1320, Fort Worth, TX 76101-1320 or deliver to the Fort Worth Scottish Rite office at 1100 Henderson Street, Fort Worth. Office Hours Tuesday through Friday 8:30am to 4:30pm. An application must be received no later than November 1 for a Spring semester, March 1 for a Summer semester, and June 1 for a Fall semester.

PLEASE PRINT OR TYPE:

Name: ____________________________________________________________
(First, Middle, Last)

Mailing Address: __________________________________________________

City: ___________________________ County: ___________________________ State: ____ Zip: __________

Date of Birth: __________ Place of Birth: ___________________________ Last 4 #s of SSN: _________

E-Mail Address____________________________ Phone Number _________________________

What community college do you plan to or now attend, and what will be or is your course of study?
________________________________________________

What is the name of the current or last high school you attended?
________________________________________________

What year did or will you graduate from high school, or if you will or did not graduate from high school what year will or did you receive your Texas Certificate of High School Equivalency? ___________

How did you learn about the Major Thomas A. Spencer scholarship program?
________________________________________________

What are your life goals and how will you use your education to obtain those goals?
________________________________________________

________________________________________________

________________________________________________

________________________________________________

________________________________________________

________________________________________________
Describe your employment history:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Do you need to work while attending college and if so, why do you need to work?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Why did you decide to attend a community college?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

I certify that the information that I have given on this application is true and correct to the best of my knowledge on the _____ day of _____________, 20___.

_____________________________________

Signature of Applicant