



Scholarship Application

Student's Name: _____

Student's ID: R _____

Permanent Mailing Address: _____

Address While Attending TTU: _____

Telephone Number: Permanent () _____ Cell () _____

Email Address: _____

Major Interest(s) in Museum Science: _____

Your Residency: _____ Texas _____ Resident of Another State Which Is _____

Are you classified as a Texas resident for tuition purposes? _____ Yes _____ No

AUTHORIZATION

I certify to the best of my knowledge, the information contained in this statement is correct and complete.

Signature: _____ Date: _____

I authorize the release of any publicity should I be the recipient of this scholarship.

Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Date Received: _____ **Received By:** _____

Approved: _____ **Amount:** _____

Declined: _____ **Date:** _____