



## Acceptance Agreement

High School Graduation Date:		
Award Year: Award Name:		Amount:
Recipient Name:		
Permanent Mailing Address:		
City:	State:	Zip:
Phone Number:	Cell Number:	
University ID #:	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:

Please make the check payable to University/College.

Please make the check payable to me.

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@texasffafoundation.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.texasffafoundation.org >Scholarships >Award)
  Please hold\*\* my scholarship until of

(semester) (year)

<sup>\*\*</sup> 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 an email requesting funding to be placed on hold for more than 24 months to scholarships@texasffafoundation.org

I agree to use my Texas FFA Award Scholarship money solely for expenses at an accredited postsecondary 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