

SCHOLARSHIP APPLICATION

Please ensure the following documents are attached or is uploaded along with your application:

- a. Proof of acceptance or intent to enroll in an eligible program (college/university, certificate program)
- b. Official or unofficial high school transcript.
- c. Applicants must submit between one (1) and three (3) letters of recommendation from a teacher, school counselor, or community leader.
- d. A typed essay (approx. 500 words)

Describe your interest in pursuing a career in fire service, law enforcement, EMS, or a related public safety field. What experiences have influenced this decision, and how do you plan to serve your community in the future?

NOTE: Essays must be the applicant's original work. The use of AI tools or third-party writing services is prohibited. All submissions are subject to review for authenticity.

PERSONAL INFORMATION

Date: _____

Applicant Full Name: _____

Address: _____

City: _____ **State:** Texas **ZIP Code:** _____

Email: _____

Phone Number: _____

Date of Birth: _____ **Age:** _____

Social Security Number: _____ - _____ - _____

EDUCATION INFORMATION

High School: _____

Graduation Date: _____ **High School GPA:** _____

EMPLOYMENT & EXPERIENCE

Employer (if applicable): _____

How long employed: _____

Volunteer Work:

School Organizations:

Leadership Experience / Roles:

POST-SECONDARY PLANS

University / College / Certification Program Attending:

Have you been accepted? Yes No

Date You Begin Classes: _____

QUALIFYING RELATIVE OR SPONSOR INFORMATION

Full Name of Qualifying Relative or Sponsor:

Address: _____

Phone Number: _____ Email: _____

Relationship to Applicant: _____

Agency Where Employed or Last Employed:

NOTE: This information will be kept confidential and used only for scholarship evaluation purposes.

Applicant Certification and Authorization

I certify that all information provided in this application is true, complete, and accurate to the best of my knowledge. I understand that providing false or misleading information may result in disqualification from consideration for this scholarship or revocation of any awarded funds.

I hereby grant permission to the TCFAIA Scholarship Committee, its representatives, and designated agents to verify any and all information submitted in this application, including but not limited to academic records, enrollment status, and supporting documentation.

I further acknowledge that, if selected as a scholarship recipient, I agree to comply with all terms and conditions of the scholarship program.

Applicant Signature: _____

Date: _____