

**The Mary Cecile Chambers Scholarship Fund
SCHOLARSHIP CONFIRMATION**

Please print legibly:

Scholarship Recipient: _____

Student Mailing Address: _____

(Include City, State, Zip)

Amount: **\$2,000.00** for each Fall and Spring Semester only
(Renewable with proper documentation each semester for a maximum of four years)

School to Attend: _____

School Mailing Address*: _____
(*for scholarship or financial aid payments)

(Address, City, State, Zip)

Student School ID # _____

IMPORTANT INFORMATION

(Please Read Carefully)

Please return the first two pages of this confirmation with the fee registration bill and class schedule as soon as possible for payment. Keep the third page for your information and use in future semesters.

1) SEMESTER DOCUMENTATION:

Every College Semester - It is your responsibility to send the following Documentation to admin@marycecilechambersscholarship.org ***as soon as possible every semester:***

- a) Copy of grade report for the previous semester (not required for 1st semester)
- b) New Registration / Fee Bill
- c) New Class Schedule

2) DEADLINE DATES:

The Deadline Dates listed below for the above information are **THE SAME EVERY YEAR** with exceptions for trimester schools. If there is a conflict, contact the scholarship coordinator.

- a) Fall Semester -- November 15
- b) Spring Semester – February 15

3) MINIMUM REOUIREMENTS:

This scholarship is contingent upon **your maintaining** the following:

- a) A minimum **Grade Point Average (“GPA”)** of **2.5** or better; and
- b) Earning at least **9 - 12** Credit Hours per semester (Trimester school is 8-9 hours) as a full-time student

SEND ALL REQUIRED INFORMATION EVEN IF YOU ARE BELOW GPA REQUIREMENTS.

4) MAILING ADDRESS:

Mail **all documentation listed above**, and any correspondence as follows:

admin@marycecilechambersscholarship.org
ATT: Claire Wilkins, Scholarship Supervisor

- 5)** After the criteria (#3 above) has been met and all documentation received, Moody National Bank Trust Division will issue a check **payable to the school you are attending to be applied against your tuition bill and/or on-campus housing, books, etc. A copy of the letter sent to the school will also be sent to your mailing address of record. Please keep that address updated with us.**

***Note:** Our goal is to help you obtain an education; however, if the minimum requirements (#3) ARE NOT maintained, you will be placed on probation for one semester; if grades continue below minimum requirements without improvement, the scholarship may no longer be available to the student. **Regardless of your GPA, please send required information every semester and a determination will be made on qualifications of student. We will work with you if you have problems but you must maintain contact with us.**

Please sign and date this form acknowledging that you have provided the correct information, and that you have read and fully understand the above information. Return the signed form and required information in the envelope provided. The original must be signed and returned with the first semester information. As a reminder, the Application Information, Instructions, and Terms and Conditions document that you signed and submitted with your scholarship application continues to govern your scholarship.

Keep the attached copy for your use in the coming years. Should you need further assistance, please call Claire Wilkins, 409-539-1953.

Scholarship Recipient Signature: _____ Date: _____

Although not required, we hope that someday you will consider making a contribution to the Mary Cecile Chambers Scholarship Fund, to help carry on and enlarge the work of the fund for other worthy students.