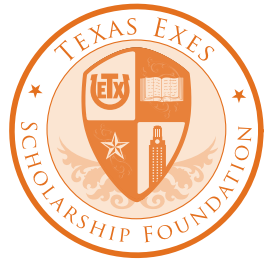


TEXAS EXES SCHOLARSHIP FOUNDATION CHAPTER SCHOLARSHIP REPORT FORM

ACADEMIC YEAR 2011-2012



Please return this completed form & applications of recipients no later than **May 15, 2011**.

Name of Chapter: _____

Chapter Scholarship Chair: _____ Phone: _____

E-mail Address: _____

Street Address: _____

City/State/Zip code: _____

Names of other selection committee members: _____

The criteria our selection committee used are: _____

CHAPTER RECIPIENTS

Our chapter is awarding ____ (#) new or continuing scholarships, ____ (#) Camp Texas scholarships, ____ (#) TESC memberships.

| NAME <small>(identify the award that applies to each student and list all that apply to each student)</small> | AMOUNT |
|---|--------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Reminder: recruited student-athletes are not eligible for Texas Exes Scholarship Foundation Awards

* Upon receiving the report form, Texas Exes will begin contacting students immediately.
If you would like us to postpone, please indicate the date we can begin contacting recipients: _____

OUR RECIPIENTS' SCHOLARSHIPS WILL BE PAID IN THE FOLLOWING MANNER:

- \$ _____ Total from enclosed chapter check
- \$ _____ Total from endowment earnings *(in accounts managed in Austin)*
- \$ _____ Total from other sources (Please note the source/s here): _____
- \$ _____ Total from Texas Exes matching funds *(maximum is \$500 per chapter after all charter requirements are met)*
- \$ _____ Total for CampTexas registration (\$165) from *(source of funds: chapter check? endowment earnings? bill chapter?)*
- _____
- \$ _____ Total for Texas Exes Student Chapter (\$20) from *(source of funds: chapter check? endowment earnings? bill chapter?)*
- _____
- \$ _____ TOTAL AMOUNT FOR OUR CHAPTER'S AWARDS**

Mail form and applications c/o Kristy Kimball, Texas Exes Scholarship Coordinator to:
PO Box 7278, Austin, TX 78713 or fax to: 512.471.8096 no later than **May 15**. Questions? Call 800-594-3939