

Applicants Name: _____

School District: _____

TASN Member # _____



Scholarship Cover Sheet

Please circle which of the following Scholarship you are applying for:

General

ESL

GED

College

TASN Managers Academy

TASN Directors Academy

TASN Industry Seminar

Scholarship submissions MUST include the following:

- ✓ Cover sheet **must** be attached to the front of All Application
- ✓ Scholarship Application must be **clearly** typed or written in **black ink**
- ✓ A **signed** letter of recommendation from your Supervisor or Director
- ✓ A **signed (your signature)** personal statement explaining how and where you intend to use the scholarship
- ✓ Statement **must** be printed or typed and include complete sentences

Scholarship Requirements:

- ✓ Prior to submitting an application, you must be employed in a school child nutrition program in Texas for nine (9) months.
- ✓ You must submit an application providing all information and attachments requested by February 15.
- ✓ You may receive only **ONE** scholarship annually.
- ✓ Individuals applying for these awards should clearly state the purpose and how the scholarship is to be used.

Mail Completed Application to:

Texas Association for School Nutrition
4130 Spicewood Springs Road # 201
Austin, Texas 78759
(512) 371-0087 / (800) 444-5189
Fax: (512) 371-0125

***Applications must be filled out completely and postmarked no later than**

February 15.

Any late or incomplete applications received will be returned to the applicant