



THE RAND HORSMAN EMPLOYEES SCHOLARSHIP

Purpose:

The award will be \$1,000 per scholarship. The goal will be to fund scholarships annually and provide assistance for a Health Science Center (HSC) employee and/or an employee's dependent who are continuing their education. The scholarship committee in concert with the UNTHSC Foundation will determine the number of scholarships that will be awarded each year. Only one member of a family may apply at a time. Online classes are accepted. Post-doctorate and their dependents are eligible whether they are attending UNTHSC or another university. Faculty may not apply.

Staff Scholarship Criteria Only - Applicants must meet the following eligibility requirements:

1. Must be a current HSC staff member who has been employed with the Health Science Center full-time for at least one year at time of application and who has a good standing from their employee review;
2. Must demonstrate a GPA of 3.0 or higher (needs to provide transcript). If first time college student then high school transcript required with submission;
3. Must be enrolled in at least 6 semester hours and taking courses that lead to a degree or certificate;
4. Must be active and on the payroll;
5. Must provide a verification of enrollment in an accredited university after the 12th class day; and
6. Must provide a completed application form and application letter (maximum of 500 words) on how this award will benefit them. The application form and the letter must be submitted by the third Friday in August for the Fall Semester and the third Friday in December for the Spring Semester to RandHorsmanScholarship@unthsc.edu.

***Preference** will be given to applicants whose degree program would benefit them directly in their current HSC position or benefit the Health Science Center.

Dependent Criteria Only – Applicants must meet the following eligibility requirements:

1. Staff member parent or guardian has been employed with the Health Science Center full-time for at least one year at the time of application;
2. Dependent must be under 25 years of age;
3. Dependent carries a GPA of 3.0 or higher (needs to provide transcript). If first time college student then high school transcript required with submission;

UNTHSC, 3500 Camp Bowie Boulevard, Fort Worth, Texas 76107-2699

For more information contact: Pam McFadden, 817-735-2539 or pam.mcfadden@unthsc.edu

4. Applicant must be enrolled in at least 12 semester hours and taking courses that lead to a degree or certificate;
5. Must provide a verification of enrollment in an accredited university after the 12th class day; and
6. Dependent must provide a completed application and application letter (maximum of 500 words) about how this award will benefit them and their family. The application form and letter must be submitted by the third Friday in August for the Fall Semester and the third Friday in December for the Spring Semester to RandHorsmanScholarship@unthsc.edu.

Additional Clarifications:

- Dependent child shall mean any naturally born child, legally adopted child, stepchild, or ward of an employee;
- Retirees and children of retirees are not eligible;
- The employee must be full time, active (not on a leave of absence) and on the HSC payroll;
- Applicant can be either an undergraduate or a graduate student; and
- A recipient can receive a scholarship for two consecutive years but they must apply each year and be selected by the Rand Horsman Employee Scholarships Committee. There is no automatic renewal based on a previous selection.
- Scholarship awards will be made after the 12th class day of the fall and/or spring semesters.

To apply for the educational scholarship, employees should email their application to RandHorsmanScholarship@unthsc.edu.



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Scholarship Application

Application Deadline: Fall (third Friday in August); Spring (third Friday in December)

Semester: Fall Spring

Year: _____

Employee Name: _____

EMPL ID: _____

Job Title: _____ Department: _____

Phone#: _____ Supervisor: _____

Hire Date: _____ % FTE: _____

If student is other than employee above:

Dependent's Name: _____

Student ID# _____

Relationship to Employee: _____

See scholarship criteria for all eligibility requirements.

_____ New or _____ Former Student (New: marriage license for a spouse or the birth certificate for a dependent must be submitted with the first scholarship application).

_____ Have you met all requirements for admission in good standing to the University?

_____ Continuing Student

Undergraduate and graduate: Do you have a minimum of 3.0 grade point average? _____

I hereby certify and I have read the criteria and believe I am eligible to apply for this scholarship and have no outstanding debt with the state of Texas. If I am later determined ineligible, the scholarship will be revoked and you will be required to return the funds.

Applicant Signature

Date

Employee Signature, if other than student

Date

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