



FINANCIAL AID EMPLOYEE SCHOLARSHIP CRITERIA

The ATLE Board of Directors will be responsible for selecting a recipient for a \$1,000 scholarship through a random drawing process for those student applicants who meet the following criteria:

- Must be a U.S. citizen, or permanent resident
- Must be enrolled full time
- Length of course must be at least 9 months
- Must have a minimum of a 3.0 GPA on a 4.0 scale, or equivalent if a different scale is used. If a recipient is an incoming freshman, the criteria will be a 3.0 GPA with regard to their high school and rank in the upper third of their class
- Must be a son or daughter whose parent or legal guardian, as defined by the FASFAA criteria, is a current employee of a FFELP participating Texas college, university, or proprietary school's Financial Aid office

Entry applications for this scholarship are available at ATLE.ORG. Completed applications must be received by Friday, July 20th, 2007. The drawing will take place at the following ATLE Board Meeting, and the ATLE President will notify the recipient. Results will be posted on the ATLE web site if the award recipient agrees to such notification.

The \$1,000 scholarship will be payable in increments of \$500.00 per semester (Fall and Spring), or in the event a school operates on a quarterly basis or alternative system, the second payment will be made midpoint through the academic year. The award is good for only one year and the second payment of the award is contingent upon the recipient being in good academic standing.

If the recipient does not meet the criteria for the second award payment, falls to less than half time, drops out of school or transfers, ATLE's Board of Directors will select another recipient based on the award criteria to receive the second award payment, and the ATLE President will notify the recipient. Award checks will be made payable to the school and forwarded to the Financial Aid Office.



Association of Texas Lenders for Education

FINANCIAL AID EMPLOYEE SCHOLARSHIP ENTRY FORM

STUDENT SECTION:

NAME _____

ADDRESS _____

PHONE (hm) _____ (cell) _____

SS# _____ DATE OF BIRTH _____

E-MAIL ADDRESS _____ US CITIZEN? _____

SCHOOL ATTENDING _____

GRADE LEVEL _____ GPA (4.0 Scale) _____

PARENT SECTION:

NAME _____

ADDRESS _____

PHONE (hm) _____ (wk) _____

PLACE OF EMPLOYMENT _____

TITLE _____

EMPLOYER CERTIFICATION:

SIGNATURE _____ DATE _____

NAME _____ TITLE _____

*All completed entry forms should be sent to:
Ms. Earlene Blocker, ATLE Scholarship Committee Chair
729 Ft. Worth Drive, Denton, TX 76201*