



100 Club Undergraduate
Active Law Enforcement Officer
Scholarship Program Application

College of Criminal Justice

NAME: _____

SAM ID: _____

ADDRESS: _____

CITY: _____

STATE: _____

ZIP CODE: _____

SHSU EMAIL: _____@shsu.edu

CELL PHONE: _____

ALTERNATE EMAIL: _____

WORK PHONE: _____

AGENCY: _____

NAME OF CHIEF / SHERIFF / CONSTABLE: _____

RANK: _____

YEARS OF SERVICE: _____

ACKNOWLEDGEMENT OF RESPONSIBILITY

- I am responsible for knowing and complying with all applicable registration policies, procedures, and deadlines.
- I will notify the scholarship coordinator of any changes in my employment status (including, but not limited to, changes in agency and rank) and of any changes in my contact information.
- I will submit a copy of my schedule to the scholarship coordinator before the first day of class each semester for which I register.
- I will notify the scholarship coordinator at Burris@shsu.edu of any changes to my academic schedule, including adding, dropping, and withdrawing from classes.
- I understand that I will be responsible for any tuition not refunded for classes dropped after the 100% drop date.
- I understand that should I resign from all classes during a semester, I will be responsible for any tuition and fees not returned to 100 Club.
- I understand that my failure to comply with these requirements may result in the loss of my funding eligibility.

SIGNATURE: _____

DATE: _____

RESTRICTIONS

- The 100 Club Scholarship Program will cover tuition and mandatory fees.
- The 100 Club Scholarship Program will cover required textbook rentals; the program will **not** cover textbook purchases.
- The 100 Club Scholarship Program will cover parking permit fees.
- The 100 Club Scholarship Program will **not** cover late registration fees.
- The 100 Club Scholarship Program will **not** cover diploma/ graduation fees.

FOR OFFICE USE ONLY	
<input type="checkbox"/> Accepted	<input type="checkbox"/> Denied
Coordinator: _____ Date: _____	