



TAMU Judo Scholarship Application



Please Type all information

Name: _____
Last First Middle UIN (if Applicable)

Date of Birth: _____ Class of _____ Email: _____

Address: _____
City State Zip Country

Judo Club: _____

Judo Coach: _____ Phone: _____

CURRENT DATA

Education: _____
Name of High School, College or University Grade / Classification

School Address: _____
City State

(Post High School Students Only) Hours Currently Enrolled: _____ Grade Point Average (4.0 Scale): _____

SCHOLARSHIP CRITERIA

The Texas A&M Judo Team will award the recipient(s) with a scholarship for the academic year provided the following conditions are met:

1. Recipient(s) will be selected by the scholarship selection committee consisting of the Team Coach, Sport Club Director, and a Team Captain / Officer of the Texas A&M University Judo Team,
2. Recipient(s) must be currently enrolled at Texas A&M University as a full-time student, or an incoming student who has gained admittance to Texas A&M. If the recipient is meeting the requirements for graduation, fewer hours may be taken that semester,
3. Recipient(s) must be in good standing with the University and maintain a minimum grade point ratio of 2.5 on a scale of 4.0. The recipient(s) cannot be on Conduct or Scholarship Probation,
4. In State Tuition waiver – Student must maintain a minimum grade point ratio 2.75

All Texas A&M Judo Scholarship recipients will be expected to:

1. Regularly attend scheduled practices and meetings,
2. Assist with fundraising activities, including tournaments hosted by Texas A&M Judo,
3. Travel to and participate in selected competitions,
4. Be a positive role model and always represent the team and University in a positive manner,
5. Hold a leadership position within the club,
6. Recipient MUST ATTEND endowment fund raiser and explain how they benefit from the award,
7. Failure to meet these obligations will result in a forfeiture of your scholarship.

By applying for and accepting the Texas A&M Judo Scholarship (if awarded) I understand that I must abide by the requirements as stated above. I realize that if I do not meet these requirements, I may lose the scholarship and all related benefits. I agree to these requirements and by signing below, I indicate my acceptance of these regulations.

Printed Name: _____ Date: _____

Signature: _____

Years in Judo: _____ **Rank:** _____ **Gender:** _____ **Height:** _____ **Weight (kg):** _____

Judo honors and awards (tournament results, awards, etc.): (please use addition sheet for more information)

Have you ever been an officer or in a leadership position within Texas A&M Judo or any other school organization? Yes _____ **No** _____

If yes, please list the organization(s) and the duties and responsibilities of the position(s)

What is the greatest contribution you have made or will make to Texas A&M Judo?

What other sources of financial support are you currently receiving funds from – University, Government, Family, Job, etc.?

Scholarships are awarded on a yearly basis. A new application will be required each year.

Mail all applications to the following address:

Texas A&M Judo
Attention: Bob Perez – Coach
4250 TAMU
College Station, Texas 77843-4250
(979) 862-8040 office
(979) 218-4582 cell
(979) 696-2494 home
bobperez@tamu.edu

Signature: _____ **Date:** _____