

Renewal Application for the Collin Employee Scholars Program



COMPLETE THIS FORM IF YOU HAVE PREVIOUSLY RECEIVED THE COLLIN EMPLOYEE SCHOLARS PROGRAM SCHOLARSHIP

RE-APPLICATION

Application Date:		Collin FT Hire Date:	
Name:		University Student ID:	
Collin Supervisor:		University:	
Collin CWID:		Graduate Program:	
Collin Job Title:		Anticipated Graduate Program Completion Date:	
Collin Office Campus:			

Year 2

Year 3

Number of graduate hours completed with a “B” or higher this academic year: _____

Term GPA: _____ Overall Graduate GPA: _____

Please attach your current transcript and submit it with this form for approval.

If you have dropped a course(s), explain your reasons.

COLLIN COLLEGE SERVICE AND INVOLVEMENT:

List your service to and involvement in the campus community that goes above and beyond the scope of your current position: **(note: if more space is needed, please use a separate sheet)**

Collin College Service and Involvement	Length of Time

Renewal Approved: _____
 Vice President

 Date

Renewal Approved: _____
 Executive Vice President

 Date