

# LOSS CONTROL SCHOLARSHIP APPLICATION

OUR MISSION IS TO SAVE LIVES THROUGH SAFETY TRAINING AND EDUCATION.

#### **Eligibility**

- Applicants must be a child of an employee of an electric cooperative, municipal electric utility or contractor participating in TEC Loss Control services, such as organizational safety meetings, Loss Control schools or the Loss Control Conference in the last 12 months
- Applicants must graduate from high school or earn a GED in the same year the scholarship is awarded.
- Scholarship recipients must meet entrance requirements and enroll in a college or trade school during the first fall semester after the scholarship is awarded. Scholarship funds will be paid directly to the appropriate institution.
- Application deadline: January 19, 2024 at 5:00 pm.

#### All applications must include

- **Two letters of recommendation** from teachers, counselors, coaches, community leaders, clergy, or electric cooperative directors or managers. One must be from a current teacher. Applicant's parents are not eligible to write letters of recommendation.
- A 300-word, typewritten essay on one of the following topics:

The Importance of Safety and Training for Linemen

The Importance of Safety at My Electric Cooperative

How Does the Cooperative Business Model Benefit the Members of My Cooperative?

How Was My Cooperative Formed?

- A description of volunteer involvement in school, church or community organizations
- · A description of supervised work activities, including job title, responsibilities and names of employers
- · A statement of goals for the future
- A high school transcript or proof of GED score

## Application Deadline is January 19, 2024 at 5:00 pm.

### Email completed and signed application to:

Tami Knipstein at tknipstein@texas-ec.org

**NOTE:** Applications submitted via email must have one composite pdf attachment containing all required materials. Incomplete applications will be considered ineligible.





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# LOSS CONTROL SCHOLARSHIP APPLICATION

Applicant's Last Name	First Name	MI		
Home Address				
City	State	ZIP		
Date of Birth	Home Phone	Cellphone		
Applicant Email Address				
Parent Email Address				
Name(s) of Parent(s) or Guardian(s)				
Father's Place of Employment				
Mother's Place of Employment				
Name of Cooperative/Organization				
Name of High School				
School Address				
City	State	ZIP		
Graduation Date				
Student's field of study, if determined				
College or trade school you plan to attend				

A description of volunteer involvement





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PAGE 3 OF 3	LOSS CON SCHOLARSHIP APPLIC	
A description of supervised work	activities	
A statement of goals for the futur	re	
Tour clieble for this achalombin	h	
participates in these TEC activity		employed by an organization that
☐ TEC Safety Meetings	☐ TEC Loss Control Schools	☐ TEC Loss Control Conference
The completed 2024 Scholarship typed essay are due by 5:00 p.m. o		tters of recommendation and a 300-word
	m sanuary 19, 2024.	
Statement of Accuracy  I hereby affirm that all stated information	n provided by me is true and correct to	o the best of my knowledge. I hereby understand that
	provide evidence of enrollment/regist	ration at the postsecondary institution I will be
Signature of Applicant	Da	te

