## **Texas District and County Attorneys Association Scholarship Program**

#### **Introduction:**

The Texas District and County Attorney Association (TDCAA) scholarship program was initiated in 2002 by the Investigator Section Board of Directors with the objective of encouraging our future through the support of our present. At least one \$1,000 scholarship will be awarded annually. Funding for this scholarship is currently provided through the sales of TDCAA merchandise and Board Fund Raisers made available at approved training conferences.

#### The following shall constitute the terms and conditions of this scholarship:

#### **Eligibility:**

- Children under legal guardianship of a current Texas District and County Attorney Association member.
- Less than 25 years old.
- Currently enrolled in or accepted by an accredited College, University or vocational- technical school in the United States, as of the application deadline.
- Cumulative High School or College grade point average of at least 3.0 (or equivalent).

#### **Disqualifications**

- No family member of any current TDCAA board member, Investigator Section board member, KP-VS Section board member, or selection committee member is eligible receive a scholarship.
- No family member of a person who donated to the fund (either money or goods) during the current year.
- No family member of a person who donated \$5,000 or more, or a person who purchases an item for more than \$5,000 is eligible to receive a scholarship if the donation or purchase occurred in the current year or the previous five years.
- For purposes of disqualification, a family member includes a spouse, child, grandchild, great grandchild, and the spouse of any child, grandchild, or great grandchild.

#### **Application Process:**

- Completed applications must be submitted to the TDCAA Investigator section scholarship committee by the application deadline.
- Essay must accompany completed application and is to be no more than two typed, double spaced pages.

#### **Selection Process:**

Three representatives from the Investigator Section will comprise the committee for the **August award**. A fourth member will act as a tie breaker should the need arise. This award is only open to the children of members of the Investigator Section. This award is given at the TDCAA Investigator Conference in August. The Committee will review each application.

Three representatives of the TDCAA Investigator Section will comprise the TDCAA Scholarship committee for the **September award**. A fourth member shall act as a tie breaker should the need arise. This award is open to children of **ALL TDCAA MEMBERS** and is presented at the TDCAA Annual Update in September.

#### A separate application must be submitted for each scholarship.

Scholarships will be awarded based on scholastic achievement, school, civic and communityactivities and the written essay. All awards are final and are contingent on the availability offunds. Awards will be paid to the recipient or registrar (or equivalent) of the recipient's school. Past recipients are not eligible.

#### **Deadlines:**

ALL applications for BOTH scholarships must be in the hands of the scholarship committee by July 1, 2021.

#### Applications will not be accepted after thedeadlines.

#### **Award Notice:**

Award recipient(s) will be notified by mail and encouraged to attend an award ceremony. For additional information, contact: Chief KC Breshears, District Attorney's Office, 801 W. Division, Orange, TX, 77630, (409) 779-9528.

# Texas District and County Attorney Association Scholarship Program

# 2021 Essay Topic

# Tell us about a time that you failed and what you learned from that failure.

Essays must be typed, double spaced, using a font size no less than 10points and must be no more than two pages in length. Please include completed essay with your application.

## Texas District and County Attorney Association Scholarship Application

#### Instructions for completing and mailing the application.

- 1. This application along with the essay must be in the hands of the scholarship committee by July 1, 2021.
- **2.** Children of members of the Investigator Section are eligible to be awarded **EITHER** scholarship, and are encouraged to apply for both. Two separate applications are required when applying for both scholarships.
- **3.** Children of members of all other sections of TDCAA may **ONLY** apply for the scholarship awarded at the Annual Conference in September.
- 4. Applicants must complete Part I and Part II. You must print legibly in ink or type the responses.
- 5. Have your high school/post-secondary counselor complete Part III and attach vour transcript.
- **6.** Before mailing, the applicant should check to see that all questions have been answered and attachments are enclosed.
- 7. It is the applicant's responsibility to make sure all information is submitted. Omission of any required items will disqualify the applicant.

**MAIL TO:** Chief KC Breshears

**District Attorney's Office** 

801 W. Division Orange, TX 77630

#### **PART I**

| Last Name                    | First Name       | Middle Name    |     |  |
|------------------------------|------------------|----------------|-----|--|
| Date of Birth                | Place of Birth   | Marital Status |     |  |
| Social Security #            | Telephone Number | Citizenship    |     |  |
| Current Address              | City             | State          | Zip |  |
| Permanent Address            | City             | State          | Zip |  |
| Name of TDCAA Family Member  | Occupation       |                |     |  |
| Work Address of TDCAA Member | County           |                |     |  |

### **PART II**

| List all of your educational experien                | ice to date:           |                   |                     |  |
|--|------------------------|-------------------|---------------------|--|
| Name of High School or College:                      |                        | Dates Attended    |                     |  |
|  |                        |                   |                     |  |
|  |                        |                   |                     |  |
|  |                        |                   |                     |  |
| What school or college will you be attend            | ing?                   |                   |                     |  |
| Present Major: Expected Graduation                   |                        |                   |                     |  |
| Proposed Occupation or Profession:                   |                        |                   |                     |  |
| List extra-curricular activities, hono               | ors and organizations, | both in school an | d in the community: |  |
| Organization   | Office/Award           |                   | Period of Time      |  |
|  |                        |                   |                     |  |
|  |                        |                   |                     |  |
|  |                        |                   |                     |  |
| List work experience during last fou                 | ır years:              |                   |                     |  |
| Company  | Type of Work           |                   | Period of Time      |  |
|  |                        |                   |                     |  |
|  |                        |                   |                     |  |
|  |                        |                   |                     |  |
|  |                        |                   |                     |  |
| I hereby acknowledge that the abide by the terms and |                        |                   | _                   |  |
| Signature of Applicant                               |                        |                   | Date                |  |

#### **PART III**

Please submit a transcript from your high school and proof of acceptance by anaccredited College, University or vocational-technical school in the United States, or if currently a post-secondary institution, along with your most current post-secondary institution transcript. Have your high school/post-secondary counselor or registrar complete the following:

| High School or Post- Secondary Institution | City                                       | State             |  |
|--|--|-------------------|--|
|  |  |                   |  |
| Year of High School Graduation:            | Post-Secondary Graduation (if applicable): |                   |  |
| · · · · · · · · · · · · · · · · · · ·      |  |                   |  |
| Grade Point Average:                       | Based on:                                  | Grade Point Scale |  |
|  |  |                   |  |
|  |  |                   |  |
| Class Rank:                                | Total # in Graduating Class:               |                   |  |
|  |  |                   |  |
|  |  |                   |  |
| Counselor/Registrar's Signature            | <del></del>                                | Date              |  |
| Counselor/Registrar's Signature            |  | Date              |  |
|  |  |                   |  |
|  |  |                   |  |
| Telephone Number                           |  |                   |  |