



LC General Scholarship Acknowledgment Form

I, _____

Palomino ID: P _____

☐ Accept

☐ Decline

the **Sylvia L Hines Memorial Scholarship** in the amount of \$ _____ which I will receive for Fall 2023 at Laredo College.

I also understand and acknowledge that in order for me to receive this scholarship I must meet the following criteria:

- I understand that I must register full-time (12SCH or more) for Fall 2023.
- I understand the funds for Spring 2024 depend on my actual course enrollment.
- I understand that I must register full-time for every subsequent long semester prior to First Class Day.
- I understand that I must complete and submit the 2023-2024 FAFSA to Laredo College (if applicable).
- I understand that I must complete a financial aid folder at the Office of Financial Aid.
- I understand that I must maintain an institutional grade point average of 3.00 or better
- I understand disbursements for fall and spring are done after the official reporting day (census date).
- I understand that this scholarship is non-transferable to any institution of higher education
- I understand in order to receive the scholarship I must meet Laredo College's Satisfactory Academic Policy (SAP) at all times.
- I understand that failure to comply with any of the above regulations will forfeit my scholarship.

Student 's Signature

Date

This form must be returned to the Enrollment Management Division, Lerma Peña 131, or via email at scholarships@laredo.edu, no later than August 31, 2023.

Failure to submit this form prior to the deadline will forfeit the scholarship.

For more information or questions, please call (956) 721-5384.

For office use only.

Received by: _____

Date: _____