

# **Application Packet**

**For**

**Two Way  
Special Utility District  
Scholarship**

**2026**

## **TWO WAY SPECIAL UTILITY DISTRICT SCHOLARSHIP**

### **Scholarship Amount**

\$1000.00

### **Eligibility Requirements**

- Must be a graduating Senior and the child, stepchild or grandchild of a customer receiving water service from Two Way Special Utility District or of a Board Member or employee of the District.
- Must enroll in the Fall semester after receipt of the scholarship. All scholarships will be paid directly to the College, University or Approved Trade School to which you have enrolled. Proof of enrollment must be presented.
- Must submit a completed Two Way Special Utility District Scholarship Application.
- Must submit an essay of approximately 200 words addressing the subject of “*The Importance of Water Conservation in the State of Texas*”.
- Must submit two letters of recommendation from a teacher, public school official or church leader who has knowledge of the applicant’s personal character, academic accomplishments and goals.

### **Deadline**

All applications are to be received or postmarked on or before March 25, 2026. Incomplete applications will be ineligible for consideration.

### **Submission and Award Information**

All applications will be reviewed by the District’s Scholarship Committee and scholarships will be awarded at the sole discretion of the Committee. Decisions of the Committee are final. The scholarship can only be received one time by any applicant. Acceptance of the scholarship constitutes permission of the recipient for promotion of his or her name and/or likeness by the District.

# TWO WAY SPECIAL UTILITY DISTRICT SCHOLARSHIP APPLICATION

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## **Personal Information**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_

## **Family Information**

Name of Parents/Guardians \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_

## **Eligible Two Way Special Utility District Customer**

*(The Customer who is receiving service, the Board Member or the Employee of the District who determines your eligibility to apply for this Scholarship)*

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ Customer Account # \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

## **High School Information**

School Name \_\_\_\_\_

Graduation Date \_\_\_\_\_

Class Rank \_\_\_\_\_ Class Size \_\_\_\_\_ GPA \_\_\_\_\_

## **School and Community Involvement**

*(Use additional page if necessary)*

List any school sponsored activities you have participated in \_\_\_\_\_

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List any offices held, academic awards, or other special recognition you have received \_\_\_\_\_

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List any community or church activities you participate in, including any volunteer work \_\_\_\_\_

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## **Future Plans**

List College, University or Trade School you have applied to

Name \_\_\_\_\_ Accepted \_\_\_\_\_

Name \_\_\_\_\_ Accepted \_\_\_\_\_

Name \_\_\_\_\_ Accepted \_\_\_\_\_

Major course of study \_\_\_\_\_

Career Goals \_\_\_\_\_

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Lifetime Goals \_\_\_\_\_

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**Certification**

We have read and understand the Scholarship Eligibility Requirements and we hereby certify that the information provided in this application is complete and accurate to the best of our knowledge. Incomplete or false information submitted as part of this application will result in the revocation of any scholarship granted.

*Signature of Applicant* \_\_\_\_\_

*Date* \_\_\_\_\_

*Signature of Parent/Guardian* \_\_\_\_\_

*Date* \_\_\_\_\_

**Application must be received or postmarked on or before March 25, 2026.**

**Please submit completed application to:** Two Way Special Utility District  
Attention Scholarship Committee  
PO Box 919  
Whitesboro, TX 76273

If you have any questions about the application or scholarship, please contact Jana Zielke at 903-564-3180.