

**Texas Instruments TechKNOW-ED Scholarship Application for
Semiconductor Manufacturing Technology and Integrated Circuit Layout**

Please write legibly in blue or black ink. Incomplete applications will not be processed.

Application Deadlines: October 30, 2003 for Spring semester 2004; March 29, 2004 for Fall semester 2004

Applicant's Information

Last Name _____ First Name _____ Middle Initial _____

Home address _____

City _____ State _____ Zip _____

Home phone # _____ Alternate phone # _____

Social security # _____ E-mail _____

Year graduated from high school _____ Intended Major _____

Number of college credit hours earned to date _____ (for current/prior college student only)

Please circle ONLY ONE answer to each of the following questions.

Are you currently a Texas Instruments employee? Yes No

Scholarship desired: SMT scholarship IC-Layout scholarship

Intended semester for scholarship: Spring semester 2003 Fall semester 2003

Intended College: Eastfield College Mountain View College Richland College

Academic Information

Must meet at least **ONE** of the following requirements. For verification purposes, please attach a copy of test scores or high school/college transcript.

1. SAT score _____ (Must have a minimum score of 900).
2. High school graduating GPA _____ (Must have a minimum GPA of 3.00).
3. Current college GPA _____ (Must have a minimum GPA of 3.00)
4. TASP-writing score _____ TASP-reading score _____ TASP-Math score _____
(Must pass all three sections of TASP)

Essay

Please submit an essay including answers to the following questions:

1. Why are you interested in this field?
2. What experience do you have with computers?
3. What experience do you have relative to drafting and/or electronics?
4. What are your hobbies?

Applicant Authorization information:

Applicant authorizes the Dallas County Community College District (DCCCD) Foundation and/or Texas Instruments, Inc. to access grades and course completion information. Applicant also authorizes Texas Instruments to publicize information included in this application and the awarding of scholarship.

Above information is true and correct and applicant fully understands that it is his/her responsibility to notify college financial aid office of any changes in status which would affect eligibility requirements of scholarship.

Applicant Signature: _____ Date: _____

DCCCD Foundation office use only:

Please verify one of the following:

GPA: Y N

SAT score: Y N

TASP score: Y N

DCCCD Foundation Signature: _____