



## **CY-FAIR EDUCATIONAL FOUNDATION**

### **Today's Students – Tomorrow's Future**

#### **Spring 2026 Enrollment Form Part I**

Name: \_\_\_\_\_

Social Security Number or College Student ID: \_\_\_\_\_

Scholarship Amount: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Cell Phone: \_\_\_\_\_

Personal Email: \_\_\_\_\_

College Email: \_\_\_\_\_

Emergency Contact & Phone Number: \_\_\_\_\_  
\_\_\_\_\_

#### **COLLEGE - FINANCIAL AID/SCHOLARSHIP OFFICE**

College Attending: \_\_\_\_\_

Financial Aid/Scholarship Office Address: \_\_\_\_\_  
\_\_\_\_\_

**SCHOLARSHIP FUNDS WILL BE PAYABLE TO THE COLLEGE YOU ARE ATTENDING.**

# Spring 2026 Enrollment Form II Policy Statement

As the scholarship recipient, you are responsible for filing the appropriate paperwork with our office **each semester** to receive your scholarship funds. Volunteers of the CFEF work year-round to raise money to continue our scholarship programs and without them you would not be receiving this scholarship.

***The following are the terms and conditions of your scholarship:***

- You **MUST** send Enrollment Form I and the policy statement (Enrollment Form II) to our office, **on or before JANUARY 16<sup>TH</sup>.**
  - **Download the Enrollment Forms from our website at [www.thecfef.org](http://www.thecfef.org).**
    - Submit them to the Foundation via email at [scholarship@thecfef.org](mailto:scholarship@thecfef.org) or mail them to CFEF • P.O. Box 1698 • Cypress, TX 77410.
  - Recipient agrees to be an active participant in the CFEF Student Success Program.
  - Verification of Enrollment (Enrollment Form III) is required from the college registrar. The CFEF understands that your enrollment cannot be verified until twelve (12) days into the semester. The college form or the CFEF form may be used.
- A Cumulative GPA of 2.5 for the academic year must be maintained or your scholarship will be forfeited.
  - The Cecil Hall Scholarship has a GPA requirement of 3.0 for the academic year.
  - The InterLinc Family Foundation Scholarship requires a minimum of GPA of 2.75 each semester and a 3.0 cumulative GPA for the academic year.
- Full-time student status must be maintained (12 hours /9 hours-Schroeder/ 6 hours- Brautigam Center graduates).
- **Recipients of scholarships greater than \$1,000 shall verify that they have not received more than 25K in other scholarships, grants, or other awards, if the Foundation determines otherwise, this will result in immediate forfeiture. The recipient consents that the Foundation may contact their university for financial information.**
- Some of our endowed scholarships have special requirements which will be outlined in your initial scholarship letter.
- **You must provide an annual thank you letter to the Foundation/Donor.**
- You must keep the CFEF apprised of your current college address, phone number, and email address.
- Scholarship payments will be made out to the college/university you are attending.

**In order to receive your scholarship payment, at the end of each semester, after grades are posted, an OFFICIAL transcript and Enrollment Forms I & II must be sent to our office. Enrollment Form III after 12 days.**

The Foundation may reproduce and/or duplicate any letter or photo that is submitted to CFEF. The use of letters and/or photos, if any, shall be without compensation and may be used by the Foundation in direct mail, newspaper advertising, radio or television broadcast, or any method of presentation.

**It is your responsibility to abide by these terms and conditions. Reminders will not be sent from this office.**

## ACKNOWLEDGEMENT AND RECEIPT OF POLICY STATEMENT

The undersigned acknowledges receipt of the Policy Statement of the scholarship program for the **CY-FAIR EDUCATIONAL FOUNDATION**, December 2025, and agrees to be bound to the terms and conditions contained therein.

Signature: \_\_\_\_\_

Print: \_\_\_\_\_

Date: \_\_\_\_\_



## **CY-FAIR EDUCATIONAL FOUNDATION**

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### **Spring 2026 Enrollment Form III**

**This form must be completed and returned twelve (12) days after the start of the semester. Please have your college registrar complete the following information or use the college form and return it to CFEF.**

Date: \_\_\_\_\_

This is to certify that: \_\_\_\_\_

Has enrolled in \_\_\_\_\_ hours

For the Spring semester of the 20\_\_\_\_-20\_\_\_\_ school year.

Signature: \_\_\_\_\_

Printed Name / Title: \_\_\_\_\_

College / University: \_\_\_\_\_

#### **Please Return To:**

**Cy-Fair Educational Foundation  
PO Box 1698  
Cypress, Texas 77410-1698  
[scholarship@thecfef.org](mailto:scholarship@thecfef.org)**