



STEPHEN F. AUSTIN  
STATE UNIVERSITY  

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NACOGDOCHES, TEXAS

Lori McGough Harkness Scholarship  
FALL 2019 APPLICATION FORM

The *Lori McGough Harkness Scholarship* for the Early Childhood Lab (ECHL) at Stephen F. Austin State University is intended to financially support families with multiple children enrolled in the ECHL.

*Lori McGough Harkness Scholarship* recipients will be selected by a committee which will include representatives within the ECHL. The following criteria will be applied. Applicants must: (1) have more than one child enrolled in the ECHL; (2) the children must reside in the same household as the parents/guardians applying for the scholarship; (3) both custodial parents/guardians (or one if the children live with only one parent/guardian) must have the employment status of full-time or they may be enrolled at SFA as a full-time student; (4) have proof of identification for each parent/guardian in the home; (5) families receiving the scholarship are expected to be current with tuition and remain current with their portion of their child's care expenses.

**Application Process:** (1) Please type or print clearly **all** appropriate information requested on this form. (2) Submit a narrative letter explaining how a childcare scholarship will impact them and their family. For additional information, please contact Deedra Vaughan, (936) 468-4006.

**MAILING INSTRUCTIONS:** This application and the narrative may be mailed, emailed or hand-delivered directly to: Deedra Vaughan, Assistant to the Director of ECHL, P. O. Box 6072 SFA, Nacogdoches, Texas 75962. Telephone Number: (936) 468-4006. Email: [vaughandd@sfasu.edu](mailto:vaughandd@sfasu.edu) Location: Janice Pattillo Early Childhood Research Center, ECHL main office, room 101.

**Deadline:** Completed application file should be delivered or **postmarked by August 31, 2019.**

**Narrative Instructions:** The narrative must be typed and double-spaced with one inch margins. Do not type on the back of the first page. Include your name on the top right corner of each page.



# PERSONAL DATA

## Parent 1 Information

Parent 1 Name \_\_\_\_\_  Male  Female  
Last First Middle Initial

Employment Status  Full-time  Part-time  Full-time SFA Student  Other \_\_\_\_\_

MySFA ID Number (if applicable) \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Email addresses (1) \_\_\_\_\_ (2) \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Mobile \_\_\_\_\_ Emergency \_\_\_\_\_

## Parent 2 Information

Parent 2 Name \_\_\_\_\_  Male  Female  
Last First Middle Initial

Employment Status  Full-time  Part-time  Full-time SFA Student  Other \_\_\_\_\_

MySFA ID Number (if applicable) \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Email addresses (1) \_\_\_\_\_ (2) \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Mobile \_\_\_\_\_ Emergency \_\_\_\_\_

## Children Information

Child #1 Enrolled at ECHL \_\_\_\_\_  Male  Female  
Last First Middle Initial

Current Class \_\_\_\_\_

Child #2 Enrolled at ECHL \_\_\_\_\_  Male  Female  
Last First Middle Initial

Current Class \_\_\_\_\_

Child #3 Enrolled at ECHL \_\_\_\_\_  Male  Female  
Last First Middle Initial

Current Class \_\_\_\_\_

Child #4 Enrolled at ECHL \_\_\_\_\_  Male  Female  
Last First Middle Initial

Current Class \_\_\_\_\_

Presently the children live with (please check one):

Both Parents  Mother  Father  Father & Step Mother  Mother & Step Father

Other (please identify) \_\_\_\_\_

Date of Application: \_\_\_\_\_

Signature of Parent 1 \_\_\_\_\_

Signature of Parent 2 \_\_\_\_\_

