**Texas Workforce Commission**

**Eligibility Form**

In order to verify that your team is eligible to be considered for a TWC grant, please follow the steps below to submit the form:

1. COMPLETE the following form on the computer. Please use the school office's phone and address.
2. PRINT the form out on your school’s letterhead. Third party organization letterhead will not be accepted.
3. SCAN all required copies of rosters and homeschool forms into a single .pdf document.
4. [LOG IN](http://firstintexas.org/grants/apply/) to your application, upload the Eligibility Form, and fill out the Eligibility Verification Page questions.

Special Circumstances

* MULTIPLE SCHOOLS: If your team has students from multiple schools, you will need one copy of the following form filled out for EACH school on the appropriate school’s letterhead.
* HOME SCHOOL STUDENTS: If your team has students who are homeschooled, for EACH homeschool student you will need a scanned copy of a withdrawal letter from their high school. If this is not available, please contact [info@firstintexas.org](mailto:info@firstintexas.org).

**REQUIRED INFORMATION**: All information marked with an \* is required to submit the form. If one or more Student ID Numbers are not available you may still submit the form.

**THIS PAGE DOES NOT NEED TO BE PRINTED OR RETURNED TO *FIRST*® IN TEXAS FOUNDATION.**

**Texas Workforce Commission Eligibility Form**

**Team Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Team Name\* | Click here to enter text. | Coach Phone\* | Click here to enter text. |
| Team Number | Click here to enter text. | Coach Email\* | Click here to enter text. |
| Coach Name\* | Click here to enter text. | Team Type\* | Choose an item. |
| Team Mailing Address\* | Click here to enter text. | | |

**School Information**

|  |  |  |
| --- | --- | --- |
| School Name\* | Independent School District\* | |
| Click here to enter text. | Click here to enter text. | |
| School Address\* | | School Phone Number\* |
| Click here to enter text. | | Click here to enter text. |

**Student Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Student Name\* | Grade\* | Student ID # | Student Name\* | Grade\* | Student ID # |
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**PLEASE PRINT THIS COMPLETED PAGE ON SCHOOL LETTERHEAD AND SUBMIT THROUGH YOUR TEAM’S ONLINE APPLICATION.**