Complete, sign and date this form and return it to the Marti Foundation, 501 W Chambers, Cleburne, TX 76033. Also send us your recent transcript.

Marti Foundation Student Semester Report

Name:			
School attended (with city	and state): _		
Report period (semester an	d year):		
Level of degree anticipated	l (i.e., bachelo	ors):	
ajor: Anticipated graduation date:otal credit hours earned (including this report period):			
Total credit hours earned (i	including this	report period):
Credit hours still needed fo	r anticipated	degree: _	
Amt. rec'd from the Marti F	oundation for	this report p	eriod:
Use this form to report to u	s how this mo	ney was used	:
Non-taxable Uses		Amount	
Tuition and fees required for courses			
Books, supplies, and equip	ment		
required for courses			
Other Uses			
Dorm or other housing rental			
School meal plan, other food			
Note: Our scholarships cannot be used			
for anything that is not listed above.			
Total expenses paid from			
Foundation scholarship for the			
report period	-		
Confirm which school you w	vill be attendi	ng next seme	ster (or next summer):
Please update your contact	information f	or our files:	
	Your permanent address information		Your personal address while you attend college
Street (or box) address			
City, state, zip			
E-mail			
Phone numbers			
Signature:			_ Date: