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## OBH SCHOLARSHIP AGREEMENT FORM

*In Order to Qualify: The applicant must be accepted into the LACT Program.*

We are excited to announce that LASACT is the recipient of a contract for LACT funding through the Office of Behavioral Health. Scholarships are available for disbursement from the beginning of Quarter 1, January 2023 until the funds are depleted. Students accepted into our LACT school automatically qualify for the scholarship which covers an entire year's worth of tuition.

*Please read and agree to each statement below by initialing.*

- \_\_\_\_\_ I understand that the scholarship covers 12 months of tuition coming to total of \$1200.
- \_\_\_\_\_ I understand that the OBH scholarship does not cover the LACT Minimum Enrollment fee of \$185 (LASACT membership dues \$90, and LACT materials fee \$95)
- \_\_\_\_\_ I understand that I am responsible for paying the \$185 minimum enrollment fee out of pocket.
- \_\_\_\_\_ I understand that the scholarship will only be applied for so long as my LASACT Membership is current.
- \_\_\_\_\_ I understand that an expired membership will result in me losing my OBH Scholarship.
- \_\_\_\_\_ I understand that the OBH Scholarship will only be applied so long as I attend class.
- \_\_\_\_\_ I understand that I am responsible for paying back the LACT program \$50 per class day that I miss.
- \_\_\_\_\_ I understand that I won't receive my credit hours or diploma if I have not fulfilled any LACT tuition balance.

By signing and dating below I agree to the above listed items.

\_\_\_\_\_  
Printed Legal Name of OBH Scholarship Recipient

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of OBH Scholarship Recipient