

New Named Scholarship Form

Name of Scholarship: Purpose / Vision (short write up of why this scholarship was established):		
Scholarship Award Information		
☐ General : Award based on finan ☐ Specific : Student must meet specify:	pecific criteria (i.e. certain degr	ree, county, GPA)
I/We wish to contribute: \$	annually over	years for a total gift of \$
\Box Foundation Determines Award Amount/Scholarship based on overall application and financial need		
☐ I want the award amount per scholarship to be:		
\square One Time / Annual:		
Donor Information/Recognition		
☐ For publications/PR Purposes I v (ex. – your name, scholarship name, fai		
\square I wish to remain anonymous		
Name:	Address:	
City:	State: Zip:	
Email:	Primary Phone:	
Donor Signature:		Date: