



# Scholarship Form



**Name of Scholarship:** \_\_\_\_\_

**Name of Donor(s):** \_\_\_\_\_

**Contact Name for Scholarship:** \_\_\_\_\_

**Address of Scholarship Contact:** \_\_\_\_\_

\_\_\_\_\_

**Phone:** ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**Email:** \_\_\_\_\_

**Purpose of Scholarship:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Endowed Scholarship Awards:**

**Named** Endowed Scholarship (recommended minimum giving level of \$10,000)

Single gift of \$ \_\_\_\_\_

Annual donations of \$ \_\_\_\_\_ over \_\_\_\_\_ years (not to exceed 5 years)

Deferred gift (i.e. Estate/Will) of \$ \_\_\_\_\_

**General** Endowed Scholarship Fund (endowment gifts of less than \$10,000)

Single gift of \$ \_\_\_\_\_     Deferred gift (i.e. Estate/Will) of \$ \_\_\_\_\_

**Annually-Funded Recurring Scholarship Awards:**

**Named** Recurring Scholarship  
(Annual gifts from Donor will be immediately used toward the scholarship)

Annual gift of \$ \_\_\_\_\_

**One-Time Expendable Scholarship Awards:**

**Named One-Time Scholarship** (recommended minimum giving level of \$500)

- Single gift of \$\_\_\_\_\_
- Monthly donations of \$\_\_\_\_\_ over \_\_\_\_\_ months (not to exceed 12 months)
- Deferred gift (i.e. Estate/Will) of \$\_\_\_\_\_

**Proposed Number of Scholarship Awards Per Year:**

One                      Two                      Other

**Proposed Award Amount:**

\$100                      \$250                      \$500                      \$1,000                      \$2,000                      Other: \_\_\_\_\_

**Scholarship Award Criteria Worksheet:**

The following options are available for donor consideration. It is recommended that criteria be established with as much flexibility as possible while still representing donor wishes. Criteria that are too restrictive may prevent the award of the scholarship due to the lack of qualified applicants.

**Financial Need**

**Merit Based** (determined by Grade Point Average on a 4.0 scale)

Minimum GPA of 3.5

Minimum GPA of 3.0

Minimum GPA of 2.5

Other Minimum GPA of \_\_\_\_\_

**Year of Study**

Elementary School

Seventh

Eighth

Freshman

Sophomore

Junior

Senior

Other

**Academic Program** (Please specify \_\_\_\_\_)

**Other Information or Preferences:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Signature of Donor:** \_\_\_\_\_ **DATE** \_\_\_\_\_

**Signature of Development Director:** \_\_\_\_\_ **DATE** \_\_\_\_\_