## **Scholarship Establishment Form**

The Foundation Scholarship Selection Committee may be comprised of faculty, staff, donors, and Foundation Directors. The committee meets in the spring to select qualified scholarship recipients. Scholarships are often coordinated with a student's overall financial aid package. Students are requested to complete a general scholarship application for a specific scholarship. The scholarship committee evaluated the student's qualifications for the various scholarships offered. Donors are notified annually of the recipients of their respective scholarships.

Scholarship Information
Name of Scholarship:
Name of Person setting up Scholarship:
Scholarship Type:  Scholarship Endowment (\$15,000 Minimum) Scholarships to be given from interest earned. Corpus Remains invested by the Foundation  Designated Scholarship (\$1,000 minimum). Minimum Scholarships is \$200.00. Must guarantee to make annual donations for a minimum of three years. If funds drop below \$200, funds will be swept into the Unrestricted Operations account.  Undesignated Scholarship (\$200.00 Minimum). One-time Scholarship. Money to be placed in the Savings Account and disbursed.
Amount of Scholarship:
Frequency of Scholarship:     Fall Only   Spring Only   Fall and Spring
Reason/History of why this scholarship is being created.
Eligibility*Criteria must not discriminate on the basis of age, race, gender, or any other protected items as stipulated by state or federal law.
Major:
GPA Required:
Completed Units Required:
Number of Units Enrolled:     Full Time (12 Units)   Part-Time (Less than 6 Units)     Transfer:
Merit Based:
Need Based:
Other Criteria:

Selection				
Would you like to be a part of the selection process?		□ Yes	$\square$ No	
Would you like to make the presentation to recipient(s)?		$\square$ Yes	$\square$ No	
How would you like to be notified?	□ Email	$\Box$ Phone	□Mail	
<b>Contact Information</b>				
Name:				
Address:				
Email:				
Phone Number:				
Alt. Phone:				
Date of Birth:				
Friend/Family Contact:				
Address:				
Email:				
Phone Number:				
Alt. Phone:				
I agree that the information provide to this Scholarship outline shall be m retroactively.				
	Stephani	ie Slagan		
	Palo Ver	Palo Verde College Foundation		
Signature	Signature			
Date	Date			

If you have any questions, or would like to make any changes, please contact Stephanie Slagan, Executive Director at 760.921.5421 or via email at Stephanie.Slagan@paloverde.edu.