



SCHOOL CERTIFICATION OF ELIGIBILITY

Every entry must be typed for clarity. This form must be completed in its entirety. Incomplete AND handwritten forms will be returned. Dates must be consistent.

Student's Name: _____
Last First Middle

Student's Degree Program: _____ GPA: _____ (2.5 min.)

Scholarship Amount Requested: \$ _____ (MAXIMUM REQUEST IS \$1,500.00)

Recommendation basis: Academic Merit Financial Need

School Personnel: _____ Title: _____

School Name: _____

School Address: _____
Number & Street Name

_____ Building/Suite (if applicable)

_____ City State Zip

The institution hereby agrees that this certification is being made on an objective, nondiscriminatory basis. Should the student fail to enroll in courses, or otherwise become ineligible for this award, the school will return the full awarded amount to The Education Foundation.

The institution certifies this student is in good academic standing, registered for courses, currently enrolled in the degree program listed below and the GPA listed below is accurate. The institution further certifies this scholarship recommendation to The Education Foundation has taken into account the financial need and/or academic merit of the applicant, and would be able to provide supporting material for such a recommendation if requested by The Education Foundation.

School Personnel's Signature: _____ Date: _____

MUST BE HAND SIGNED ABOVE; NO DIGITAL SIGNATURES ACCEPTED