

AMERICAN GELBVIEWH *Foundation*

Application for Foundation Money for Junior Scholarships

Name of Submitter _____

Name of Grant Scholarship Requested _____

Date of Submittal Request _____

Amount of the Scholarship _____

Date the Scholarship was Awarded _____

Date Expected to be paid _____

What Committee Awarded the Scholarship? _____

Committee Members - _____

Have all criteria been fulfilled by the Scholarship Winner _____?

Payable to _____

Address _____

Address 2 _____

City/State/Zip _____

Amount _____

Approved by _____ Date Approved _____

Was there a board meeting to approve said request? _____ Approved or Denied _____

(If denied, please attach the minutes and information for the requestor).

Growing our Future by Building our Foundation

Return these forms to foundation@gelbvieh.org or fax to 303-465-2339.