



Scholarship/Award Information Form

The following guidelines are offered to assist donors in creating Endowed Scholarships to benefit current Glendale Community College students, students transferring to a four-year university, or graduating students.

Donor Information

Full name: _____ Cell Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip code: _____

Name of donor's agent (if applicable): _____

Administrator's phone number: _____ Administrator's Email: _____

Award Information

Scholarship name: _____

Number of awards: _____ Amount(s): _____

How often awarded: _____ Length of authorization: _____

Spring and/or Fall _____

When will the scholarship be awarded? *Please mark your choice (x).*

While the recipient is enrolled at Glendale College

Upon the recipient's transfer to a four-year college or university

Upon the recipient's graduation from Glendale College

Other: _____

Eligibility Criteria

Academic Achievement: _____ GPA (Specify minimum): _____

Major: _____ Campus Activities: _____

Financial Need: _____

Community Service: _____

Other: _____

Comments: _____

Recipient Selector*Please mark your choice (x).*

Glendale College Scholarship Committee:

Glendale College Scholarship Office:

Donor:

Instructional Division or Department:

Other:

Comments:

Award Usage*Please mark (x) all that apply.*Tuition and Fees: Educational Expenses:

Other Criteria:

Scholarship Biography*Please tell us more about the story of this award, and what it means to you!*

On behalf of the board and staff of the Glendale College Foundation, and the many thousands of students whose lives are changed here, we thank you for your donation!

Donor or Agent's Signature:

Date:

Please contact Paola Santana with any questions. Call at (818) 551-5196 or email at psantana@glendale.edu