



# College of the Siskiyous Foundation

## Annual Pass Through or One-Time Scholarship

### MEMORANDUM OF AGREEMENT

Scholarship Name: \_\_\_\_\_

Sponsoring Individual/Organization: \_\_\_\_\_

Scholarship Contact: \_\_\_\_\_

Organization/Individual Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Organization/Individual Phone Number: \_\_\_\_\_

Organization /Individual Email: \_\_\_\_\_

This scholarship is made  In honor of  In memory of  
Whom? \_\_\_\_\_

The Foundation accepts this gift and agrees that all of the funds shall be used to award scholarship(s) to deserving student(s) meeting the following eligibility criteria.

1. Specific Course of Study: \_\_\_\_\_

2. Required Academic Standing  2.0  2.5  3.0  3.5  4.0

3. Enrollment Status:  Full-time  Part-time  Full- or Part-time

4. Financial Constraints:  Need based  Need not considered

5. Other Criteria:

Scholarship funds can be used for:  Tuition and Fees  Books and Supplies  
 Academic Related Expenses (transportation, child care, housing, etc.)

School year scholarship fund is to be initiated: \_\_\_\_\_

Award selection will be coordinated with the Financial Aid Office at College of the Siskiyous in accordance with the restrictions outlined in this scholarship agreement. Final approval of distribution of scholarships and expenditures rests with the Board of Directors of the Foundation.

The individual or organization must renew annual pass through scholarships each year. The individual or organizations supporting the cost of the scholarship are responsible to provide the funding that will be administered the following academic year.

Number of students to receive award annually: \_\_\_\_\_

Amount of each award: \_\_\_\_\_

Establish a fund of \_\_\_\_\_ to be utilized until depleted.

**Recognition of the Scholarship**

This scholarship may be publicized and listed as sponsored by me/my organization.

For press release purposes, please enclose any information about your organization or the individual the scholarship honors.

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If, at any time in the future, the supporting individual or organization does not financially support this scholarship fund, the COS Auxiliary Foundation shall have the authority to withdraw all support services.

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Representing the Donor(s)

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Date

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Representing the COS Auxiliary Foundation

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Date