

FOUNDATION SCHOLARSHIP AGREEMENT

CHANGE LIVES FOREVER THROUGH THE GIFT OF EDUCATION

Scholarship Name:

		□Memorial □Honorarium □Other			
Established by:	Name				
	Address				
	City, State, Zip				
	Phone			□Home	e □Cell □Work
	Email				
Scholarship Type:		Endowment	□Annual 10,000 completed wi	Dothe	
Gift Amount:	\$	□Cash/Check	□Equities	□Othe	er
Scholarship Award:	# Awards	\$ per Awa	rd (if set payout)	Renewa	ble □Yes □No
Award Preference:	No Restrictions Program/Degree				
	Residency	Delta County	Dickinson	County	□Other
	Enrollment	□Full time (≥12 credits/semester)		☐Part time	
	Status	□Freshman (1 st year)	□Sophomo (25+ credits)		□Non-traditional (Age 26+)
	Financial				Merit Based
	Other Criteria				
Contact Information:	Name & address of person(s) to receive scholarship information	□Same as above			
Publicity:		Press release	Picture	□Ano	nymous Gift

Publicity:

LI Press release

DANONYMOUS GIT

Scholarships are managed by the Bay College Foundation in conjunction with the guidance of established criteria by the Scholarship Committee and Foundation Board, consistent with the laws of the State of Michigan and rules, directions and instructions appertaining to such awards as directed by the IRS. Scholarship awards shall be provided from income distributions of the endowment investments, consistent with the Foundation's Investment and Spending Policy, state/federal regulations and signed scholarship agreement. Residual income shall be re-invested annually. All scholarships require recipients to maintain a minimum 2.5 GPA, 6 contact hours and be applied towards tuition, fees and books unless defined otherwise. Criteria requiring financial need must be evidenced by the Free Application for Federal Student Aid (FAFSA).

I/We agree with the information above and proudly establish this Bay College Scholarship

Donor(s):

Date

Foundation:

Kim Carne, VP College Advancement

Date

Bay de Noc Community College Foundation 2001 N Lincoln Road, Escanaba, MI 49829