CSF of BGM Dollars for Scholars – Data Application

BGM Class of _____

>> NOTE: Funds will not be released until this application and all official documents are received. < < <

APPLICANT DATA – Address listed below will be used for mailing the next CSF application							
First Name:				Last Name:			
Street or PO Box:			City:		State:	ZIP:	
I plan to delay my post-secondary education due to:			Telephone:				
Delaying Start Date (1 semester or 1 year only)			Student Email (update email on Student Profile to match):				
Military Service (Attach a copy of military orders.)							
Personal Circumstance (Requires CSF approval)			Alternate Email:				
COLLEGE DATA – Scholarship is being requested for this post-secondary school							
Name of College:			Include new Letter of Acceptance when transferring to a different school.				
Street or PO Box:			City: State: ZIP:			ZIP:	
Registrar/Admissions Phone No.:			Anticipated College Graduation Date:				
College Student ID #:	Year (Year Graduated from BGM:					
Major Field of Study:							
# Credits Planned to Earn this Year:			F	full Time	Part Time	Part Time	
Do you plan to complete degree previously started?				/es	No		
Have you changed field of study since last application?				/es	No	Lau	
Type of School: 2 Year	4 Year Pri	vate	-	Public	Voc Tech	Other	
Student Living Arrangements:			Off Campus		Commute		
OFFICIAL DOCUMENTS REQUIRED – Document <u>must contain</u> : 1) Student's Name 2) ID Number (if available) 3) Name of School							
Letterhead or printout containing this information is acceptable. These may be separate or combined documents depending on the school.							
Letter of Acceptance (1st year applicants or when transferring to a different school)							
Cumulative GPA (1st year applicants are not required to submit this information until second semester)							
Class Schedule (semester schedule showing credit hours)							
Billing Statement (Detailed – includes college name, student ID #, and expenses in \$ value)							
These documents can be mailed or emailed to the following address:							
USPS Mail: CSF of B-G-M Dollars for Scholars OR Email: vvfarms@netins.net PO Box 469, Brooklyn, IA 52211 (Please send as PDF Attachments Only)							
Questions regarding official documents should be directed to Louise Van Ersvelde (641-522-7919).							
CERTIFICATION AND SIGNATURE							
 All information on this application is true and complete to the best of my knowledge. I agree to give proof of the information submitted should it be requested by an authorized official of the CSF of B-G-M Dollars for Scholars. I understand if I fail to give proof, I will not qualify for a scholarship. I certify I will be attending the above named institution during the school year for which I am making this application. I agree to permit CSF of B-G-M Dollars for Scholars to confer with my post-secondary institution to verify my enrollment during the term of my award. I agree that CSF of B-G-M Dollars for Scholars and its parent organization, Scholarship America and its affiliated programs and regional offices, may use my name, photograph, the address and name of my school, community and post-secondary institution I will attend, and award amount in paper and/or electronic press releases, public announcements, and other fundraising or promotional materials. I understand that all my payments of awards will be made to the college I am attending. If I have exceeded the amount of non-taxable aid as deemed by the college, the college may return excess amounts back to the foundation. I understand awards I receive could be taxable to my parents or me and we may need to consult a tax specialist for advice or assistance. I understand I must attend an accredited school to receive my scholarship award. Accreditation means the school I attend is deemed eligible for federal financial aid opportunities by Department of Education standards. I understand I must submit this application with all official documents. 							
Applicant Signature Date							