

BENTON SCHOLARSHIP FOUNDATION SCHOLARSHIP CLAIM FORM

This completed claim form must accompany a copy (does not need to be an original) of your transcript when requesting scholarship money.

Scholarship money will be awarded to designated institutions upon completion of one semester (2 exceptions below) of college classes and verification of completion by transcript. All checks will be made payable to the institution. No payments will be made directly to a student. Part-time college students are eligible for award money.

NOTE THE FOLLOWING

Ruth Schloeman Memorial Scholarship recipients will be paid to the college after satisfactorily completing freshman year (2 semesters) at a four-year college.

H.O. Schloeman Memorial Scholarship recipients MUST attend lowa State University beginning their collegiate freshman year to be eligible for consideration. The scholarship will be paid to lowa State after satisfactorily completing their freshman year (2 semesters) of college.

Scholarship recipients have three years to claim award money, i.e. 2018 graduates have till 2021. Those entering the armed forces and attending college at a later date may be eligible to defer their award money longer than three years following graduation. To do this, notify Treasurer-Andy Jones by email or send a letter to the BSF postal address.

The claim form along with an e-copy of your college transcript can be sent directly to BSF Treasurer-Andy Jones at ajones62@netins.net. Or, the two items can be mailed to Benton Scholarship Foundation, P.O. Box 129, Van Horne, lowa 52346.

Please direct financial questions to Andy Jones, ajones62@netins.net, Benton Scholarship Foundation Treasurer.

Graduation year: Schola	arship Recipient Full Name:
(Only 1 claim form is needed if multiple scholarships were awarded. Complete as applicable.)	
1st Scholarship Name (stated on awa	ard certificate):
1st Scholarship Amount (stated on award certificate):	
2 nd Scholarship Name (stated on awa	ard certificate):
2 nd Scholarship Amount (stated on av	ward certificate):
3 rd Scholarship Name (stated on awa	ard certificate):
3rd Scholarship Amount (stated on a	ward certificate):
Name of Institution to receive award	money:
Address of Institution to receive money:	

This claim form is also available on-line at bentonia.dollarsforscholars.org in the students and parents tab.