



# THE COMMUNITY FOUNDATION

## RENEWAL FORM

Name of Scholarship: Clifford B. Bushnell Scholarship

Student Name \_\_\_\_\_ Student ID# \_\_\_\_\_

Home Address \_\_\_\_\_ Email \_\_\_\_\_

The above student

\_\_\_\_\_ has maintained at least a B average (3.0/4.0 GPA) for the 20\_\_ - 20\_\_ school year

\_\_\_\_\_ has not maintained at least a B average (3.0/4.0 GPA) for the 20\_\_ - 20\_\_ school year

AND

\_\_\_\_\_ is enrolled for the coming year at this college

\_\_\_\_\_ is not enrolled for the coming year at this college

AND

\_\_\_\_\_ has continued financial need

\_\_\_\_\_ does not have continued financial need

**College Name** \_\_\_\_\_

Although this form and the college official's signature is not required, it is helpful to complete and submit this form as part of the renewal process.

Upload this completed form to the Scholarship Acceptance and Renewal Form along with the other requested and required information.

Should you have any questions, please email [scholarships@racf.org](mailto:scholarships@racf.org).