



THE COMMUNITY FOUNDATION

RENEWAL FORM

Name of Scholarship: Oblak/Farrell Student Scholarship

Student Name _____ Student ID# _____

Home Address _____ Email _____

To be completed and verified by school:

The above student

_____ was enrolled for the most recent FALL / SPRING 20_____ semester at this college

OR

_____ was *not* enrolled for the most recent FALL / SPRING 20_____ semester at this college

AND

_____ is enrolled for the upcoming FALL / SPRING 20_____ semester at this college

OR

_____ is *not* enrolled for the upcoming FALL / SPRING 20_____ semester at this college

College Name _____

College Official's Signature/Title _____

Date _____

Not valid without official seal/stamp

Upload this completed form to the Scholarship Documentation Collection Portal along with an update to share with donors.

Be sure to include a brief summary of your progress in college along with your work and/or service on campus or in the community.