



# THE COMMUNITY FOUNDATION

## Renewal Form

**Name of Scholarship:** William and Irene Rolfe Scholarship

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

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

*To be completed by school:*

The above student

\_\_\_\_\_ maintained a 2.0 GPA or higher for the most recent 20\_\_-20\_\_ school year

\_\_\_\_\_ did not maintain a 2.0 GPA or higher for the most recent 20\_\_-20\_\_ school year

AND

\_\_\_\_\_ is enrolled for the upcoming/current 20\_\_-20\_\_ school year at this college  
*(circle one)*

\_\_\_\_\_ is not enrolled for the upcoming/current 20\_\_-20\_\_ school year at this college  
*(circle one)*

**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.