



THE COMMUNITY FOUNDATION

RENEWAL FORM

Thomas G. Welch Memorial Scholarship

Student Name _____ Student ID# _____

Home Address _____ Email _____

To be completed by school:

The above student

_____ has maintained a minimum 2.0 GPA for the most recent _____ 20__ semester

_____ has not maintained a minimum 2.0 GPA for the most recent _____ 20__ semester

AND

_____ is enrolled for the coming _____ 20__ semester at this college

_____ is not enrolled for the coming _____ 20__ semester at this college

Major: _____ Degree Type: _____
(Must be in information technology, engineering, or another technical field to remain eligible)

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.