THE COMMUNITY FOUNDATION

RENEWAL FORM

Name of Scholarship: Cholish Engineering Scholarship

Student Name _____ Student ID# _____

Home Address _____ Email _____

To be completed and verified by school:

The above student

_____has maintained a minimum 3.0 cumulative GPA (out of 4.0) for the most recent 20____ - 20 ____ year

OR
_____has not maintained a minimum 3.0 cumulative GPA (out of 4.0) for the most recent 20____ - 20 ____ year

AND

_____is enrolled for the coming 20____ - 20 ____ year at this college

 OR
_____is not enrolled for the coming 20____ - 20 ____ year at this college

Major: _____ Degree Type: _____ Anticipated Graduation Date: _____
(Must be in engineering to remain eligible)

Current Class Level: ___Freshman ___Sophomore ___Junior ___Senior

Completed Credit Hrs toward program: _____

College Name _____

_____
College Official's Signature/Title   **Date**

Not valid without official seal/stamp

Student must send completed form to:

The Community Foundation
500 East Avenue
Rochester, NY 14607-1912