

# Recipient Notification

Follow the link found at [www.racf.org/ScholarshipAdmin](http://www.racf.org/ScholarshipAdmin) (under the heading “Submitting Recipient Information”). Click “Apply” to begin the form. *Note the form by default is called an application. Be advised that a separate form will need to be created for each scholarship that you are facilitating on behalf of the Community Foundation; however, only one form can be added to your cart at a time.*

Recipient Notification Form (FOR ADMIN USE ONLY)

Begin Accepting Applications Date: 1/01/2019

Deadline Date (EST Time Zone): 12/31/2019 11:59 PM

Apply

Log in or create an account. Each Scholarship Caretaker will require a unique email that will become his or her User ID moving forward.

Welcome Search for Scholarship | Login

Login

Sign in

\* Email

\* Password

Password is case sensitive.

Login Cancel

Forgot Password?

Welcome to the Rochester Area Community Foundation

New Applicants/First Time Users

Click the "Create New Account" button below in order to begin a new application.

Existing Applicants

Enter your Username and Password to complete the application. (Your username is the email address and password you initially used to set up your account.)

Forgot Password

Click on "Forgot Password" and enter your login email address to reset your password. Once complete, an email will be sent asking you to reset your password. You will receive a confirmation email once you've successfully reset your password.

Create New Account

The form will be added to your cart. Choose “Apply” to begin.

Search My Applications My Interest Cart

Application Fund Details

Recipient Notification Form (FOR ADMIN USE ONLY)

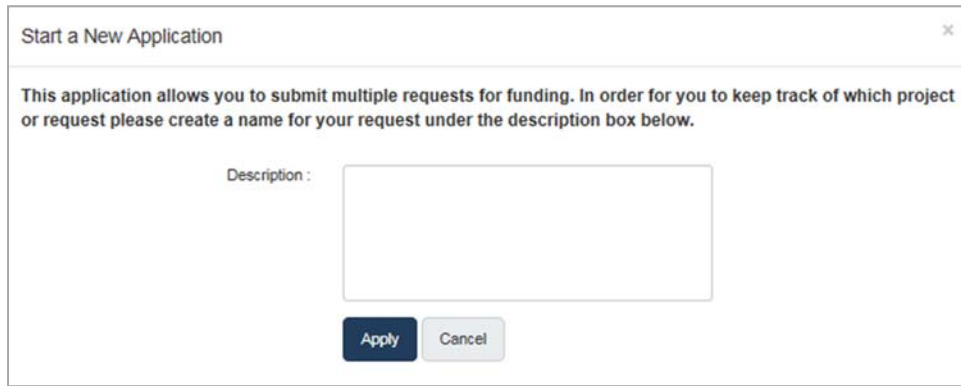
Begin Accepting Applications Date: 1/01/2019

Deadline Date (EST Time Zone): 12/31/2019 11:59 PM

Apply

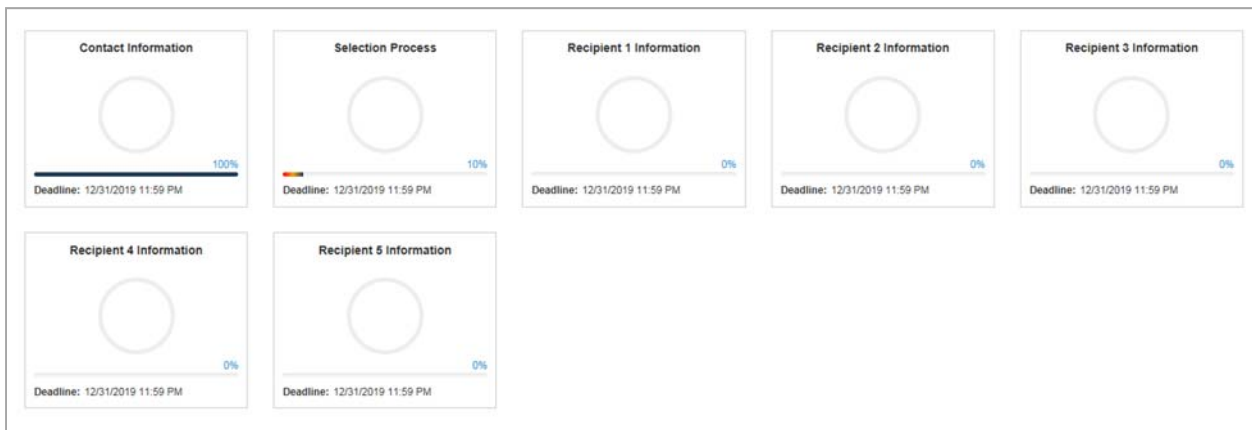
In Cart

Enter the name of the scholarship and click “Apply.” *This step is to help differentiate multiple submissions and is especially important if you are responsible for completing the notification form for more than one scholarship.*



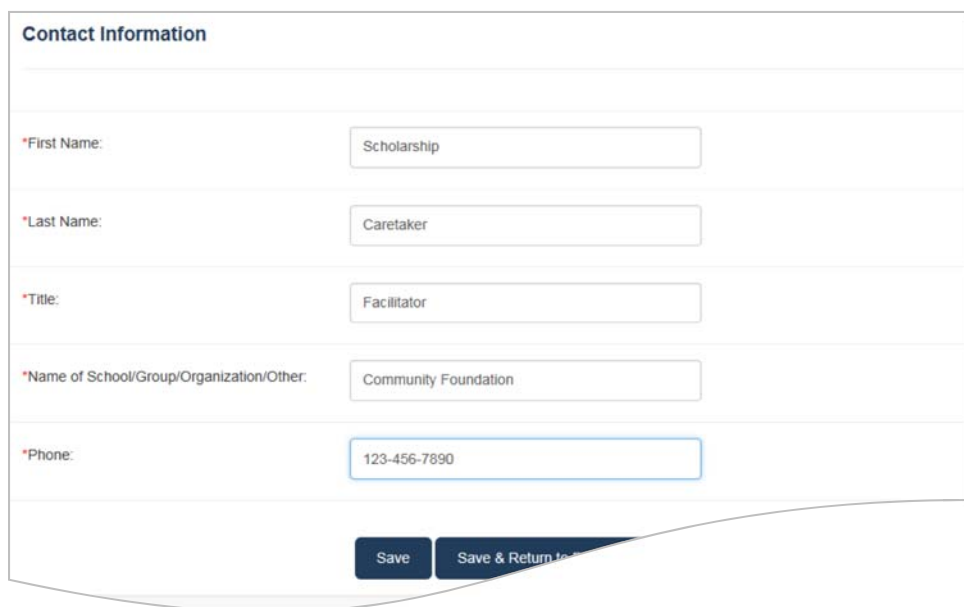
The screenshot shows a dialog box titled "Start a New Application" with a close button (X) in the top right corner. Below the title, there is a text instruction: "This application allows you to submit multiple requests for funding. In order for you to keep track of which project or request please create a name for your request under the description box below." Below this instruction is a text input field labeled "Description :". At the bottom of the dialog box, there are two buttons: "Apply" (highlighted in dark blue) and "Cancel" (greyed out).

Complete each of the sections in the application to 100 percent. *Once the number of recipients is indicated under the Selection Process, the Recipient Information section(s) will appear.*



The screenshot displays a dashboard with seven progress cards arranged in two rows. Each card has a title, a circular progress indicator, a percentage completion, and a deadline. The first card, "Contact Information", is 100% complete. The second card, "Selection Process", is 10% complete. The remaining five cards, "Recipient 1 Information" through "Recipient 5 Information", are all 0% complete. All cards have a deadline of "12/31/2019 11:59 PM".

Begin the process by completing the Contact Information section. *This is the Scholarship Caretaker information. Note that once this information is entered, it can be imported into new applications by clicking on the “Choose Action” drop down on the top left of the screen.*



The screenshot shows the "Contact Information" form with the following fields and values:


- \*First Name: Scholarship
- \*Last Name: Caretaker
- \*Title: Facilitator
- \*Name of School/Group/Organization/Other: Community Foundation
- \*Phone: 123-456-7890

At the bottom of the form, there are two buttons: "Save" and "Save & Return to..." (partially visible).


Complete the Selection Process information section. This section includes the name of the scholarship, selection meeting information, committee membership, and certification.


*Selection Process:* Choose the Scholarship Title from the drop-down list. If the award will be presented at the awards night or graduation ceremony, enter the date of the ceremony (used for the printed materials) and the date needed (target date for the pieces to be in hand).

From the drop-down list please select the name of the Scholarship Fund that this form pertains to:

\*Name of Scholarship:  


If the award will be distributed at the awards night or graduation ceremony, please indicate below the date of the ceremony and date the materials are needed.

Date of Award Ceremony:    
Please click on the calendar icon to enter date in (mm/dd/yyyy e.g., 01/04/2019 format).

Date Needed:    
Please click on the calendar icon to enter date in (mm/dd/yyyy e.g., 01/04/2019 format).

*Selection Meeting Information:* Enter the selection meeting information.

**Selection Meeting Information**

\*Date of Selection Meeting:    
Please click on the calendar icon to enter date in (mm/dd/yyyy e.g., 01/04/2019 format).

\*Type of Process:  Application  Nomination

\*Number of Applications/Nominations Received:


\*Number of Recipients Selected:

*Committee Members:* Enter the committee member information. There are enough spaces for up to 15 committee members.

**Committee Members**

Please select one descriptor from the list below that **best** described the committee members who participated in the review and selection process (be sure to review the committee criteria in the scholarship description):

\*Committee Member Name 1:

\*Link to Committee:  

Specify Organization/Position/Subject Field:

\*Add another committee member?  Yes  No

**Certification:** Certify that an open, fair, and equitable process was used to select the student(s).

I certify that

- an open, fair, and equitable process was used to select the student(s),
- the **criteria** of the scholarship as determined by the donor and the Community Foundation were fully met,
- no members of any recipient's immediate family participated in the selection process (**HR4**) and
- no fund donor or related party directly or indirectly controlled the scholarship selection process (**HR4**).

• Additionally, the selection process adhered to the provisions of an **employer related scholarship**.

\*Agree to the above certification:  Yes

\*Signature:

Enter your name as "Scholarship Student" to Confirm your Electronic Signature.

Click "Save & Return to Dashboard."

Then, enter each recipient's contact information, school, and award details.

**Recipient Information**

\*Title:  Ms.  Mr.  Other

\*First Name of Recipient:

Middle Name of Recipient:

\*Last Name of Recipient:

Racial/Ethnic Background: (Check all that apply)

<input type="checkbox"/> White Non-Hispanic	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<input type="checkbox"/> Hispanic or Latino
<input type="checkbox"/> Black Non-Hispanic	<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Asian
<input type="checkbox"/> Other		

\*Home Street Address:

\*City:

Click "Save & Return to Dashboard."

Click "Submit" when each section of the form is complete.