



THE COMMUNITY FOUNDATION

MID-YEAR ACADEMIC VERIFICATION FORM

Name of Scholarship: Sharon Marie All Memorial Scholarship

Student Name _____ Student ID# _____

Home Address _____ Email _____

The above student

_____ has maintained at least a 3.0 GPA for the Fall semester

_____ has not maintained at least a 3.0 GPA for the Fall semester

AND

_____ was enrolled full-time during the Fall semester

_____ was not enrolled full-time during the Fall semester

AND

_____ is enrolled full-time for the upcoming Spring semester at this college

_____ is not enrolled full-time for the upcoming Spring semester at this college

College Name _____

Although this form and the college official's signature is not required,
it is helpful to complete and submit this form as part of the renewal process.

Upload this completed form to the Scholarship Acceptance and Renewal Form
along with the other requested and required information.

Should you have any questions, please email scholarships@racf.org.