

Youth Ag & Leadership Foundation of Sonoma County

Scholarship Donation Application

Thank you for your support! Please complete the following information to identify your preferences and priorities in selecting award recipients. Return the completed form to the YAL Foundation of Sonoma County, PO Box 1283, Rohnert Park, CA 94927 or email to office.youthagleadership@gmail.com. Please note that the more restrictions or requirements scholarships have, the more difficult it is to award funds. Scholarships must be a minimum donation of \$1,000, the entire donation will be awarded to the student, no fees for administering your scholarship.

Official Title of Scholarship (for promotion and publication)

Scholarship Description (for promotion and publication)

Sponsor/Donor

Name _____ Phone _____
Address _____ City/State/Zip _____
Fax Number _____ E-Mail _____

Contact Person (Please notify us if any contact information changes)

Name _____ Phone _____
Address _____ City/State/Zip _____
Fax Number _____ E-Mail _____

Funding (Check all that apply)

_____ Award amount \$ _____
_____ Check enclosed
_____ Donor will send check to YAL by _____ (date).
_____ Donor requests YAL bill the donor/contact person
_____ annually or
_____ by semester/term.

The recipient should have the qualifications listed below: (circle all that apply)

1. A resident of a particular town, area, etc.: Yes or No

If yes, please specify: _____

2. A graduate of a particular high school(s): Yes or No

If yes, please specify: _____

3. Majoring in a particular program of study: Yes or No

If yes, please specify: _____

4. Have a minimum grade point average or higher: Yes or No

If yes, ___ 2.0 (C) ___ 2.5 ___ 3.0 (B) ___ 3.5 ___ 4.0 (A) ___ no preference

5. Enroll at least: ___ full-time (12+) ___ 3/4 time (9-11) ___ 1/2 time (6-8) ___ no preference

6. Be a: ___ freshman (0-29 credit hrs completed) ___ sophomore (30+ credit hrs completed) ___ upperclassmen ___ no preference

7. Demonstrate financial need: ___ Yes ___ No ___ no preference

8. Attend a particular college: Yes or No

If yes, please specify: _____

Is the scholarship renewable? ___ Yes ___ No

If Yes: ___ Student must reapply each year

___ Automatically renew scholarship up to ___ years if student continues to meet criteria

Please list any other issues, criteria or important information about this scholarship:
