



A. HIGH SCHOOL INFORMATION

School Name:

Phone:

Address:

SCRIBE Data Entry date:

B. ORGANIZATION/ INSTITUTION INFORMATION

Name	Address	Phone	Contact Representative	Total \$ Award to Matched

C. STUDENT INFORMATION

Student Name(s) (alphabetical by last name)	SSID	Permanent Address	Amount Awarded	Semester or Academic School year for which the scholarship is applicable

D. ATTACHED DOCUMENTATION

Approved documentation includes a **copy** of the original:

check all that apply

A letter you received from the organization

Media or newspaper article

The award certificate(s)

Guidance school counselor letter of award recipient

Scholarship check

E. APPLICATION AUTHORIZING SIGNATURE(S)

School Authorizing Signature

Title

Date

School GEAR UP Coordinator

Date