Bigfork High School Community Scholarship Program Donor Participation Form for 2024/2025

Donor's Name	
Address	
Phone	Email
Name of Scholarsh	nip
Amount of Scholar	'ship
and recipient – Bigfo award to be tax ded	that money awarded to students be transferred between the donor ork Schools can't deposit or manage the funds. Also, in order for the uctible, the money must be awarded directly to the educational tudent (both names appear on the check, student signs it over).
Please check the mestudent(s):	ethod(s) you wish to transfer your scholarship award to the selected
would like Bh school they p	nolarship Committee will select the winner(s) of my scholarship and HS to send the name and address of the winner(s), as well as the plan to attend so I can send the funds to the student with the funds both the institution and the student.
name and ad	ne recipient(s) of the scholarship and would like BHS to send me the dress of student(s) chosen, as well as the school they plan to attend I the funds to the student with the funds made out to both the d the student.
his/her first te	he student(s) the donor's name and address and have them send erm grades, then the scholarship funds will be sent to the student both the institution and the student.
•	you would like to review the applications for your scholarship award pient(s), please indicate a date you would like to have the or review.
	wish to review the applications and decide the recipient(s) and like the applications by (due date)

Please indicate any criteria you would like to specify to be used in selecting the recipient(s) of your scholarship, such as academic achievement (with a specific minimum GPA), financial need, talent, interests, community service, specific area of study, etc.			
The scholarships will be announced at the Awards Assembly, in the Graduation Day Program as an insert, and in the local newspapers.			
Thursday, N	•	e to attend the Senior Awards Assembly on m. and/or present your scholarship. The assembly will sium.	
	Yes, I would like to	present my scholarship at the assembly.	
		present, but would like it to be announced at the the student to be recognized.	
know that st	, ,	to participate in this much appreciated program. Inmunity members have always been very grateful for	
Please return this form to:		Bigfork High School Community Scholarship Program c/o Solveig Munson P.O. Box 188 Bigfork, MT 59911	
	Or by fax	837.7245	
	Or email	smunson@bigfork.k12.mt.us	