

Scholarship Funds Request

ALLOW 30 DAYS FOR PROCESSING – SUBMIT ALL REQUIRED ITEMS

Mail or fax form to: America's Junior Miss Scholarship Foundation
751 Government Street, Mobile AL 36602
Fax: 251.431.0063 | Phone: 251.438.3621

SECTION A: FUNDS REQUEST

I will attend _____ in _____.

Name of School

City, State

Beginning _____ / _____. My school reports grades each Quarter / Semester.

Month

Year

Circle One

I anticipate using my scholarship during the _____ term of _____.

Year

Please check the box below to indicate how we should disburse the funds:

- Payment to the school: please send me a check payable to the school in the amount of \$_____. The funds are due by ____ / ____ / _____ (MM/DD/YYYY).
- Reimbursement: I have paid my expenses and submit receipts and/or copies of cancelled checks for reimbursement in the amount of \$_____.

WE REQUIRE ALL THE INFORMATION BELOW TO PROCESS YOUR REQUEST:

Print your name Signature

Address

(_____) _____
Phone Social Security Number Date

E-mail Name and year of all DYW programs from which you will receive funds.

SECTION B: TRANSCRIPT RELEASE STATEMENT

In consideration of the academic scholarship awarded me and administered by the America's Junior Miss Scholarship Foundation, I authorize _____ or any other educational institution I may attend to furnish the Foundation with certified transcripts of grades and credits earned by me at the end of each grading period. This authorization will remain in effect for as long as I am a recipient of scholarship funds from the foundation and for such periods as I use the funds.

Signature Date

Your completed request **MUST** include:

- Scholarship Funds Request Form
 - If a payment to the school request, include current tuition statement showing what is owed
 - If a reimbursement request, include receipts and/or cancelled checks
- Signed Scholarship Rules and Regulations
- Proof of full-time enrollment i.e. a copy of your schedule (an acceptance letter is not proof of enrollment)

For Internal Use Only

Acct# _____
Balance \$ _____
Date _____

Unsigned or incomplete forms will delay processing your request!