WAKE TECH FOUNDATION

SCHOLARSHIP ESTABLISHMENT FORM

Based on current tuition rates:

- **$2,250** will pay *tuition and fees* for one in-state full-time student for two semesters/one academic year
- **$3,000** will pay *tuition, fees, and books* for one in-state full-time student for two semesters *(costs vary per program)*

FUNDING OPTIONS

○ **Endowed (Permanent) Scholarship Fund**

- Minimum commitment = $37,500
- *A signed endowment policy must accompany this form.*

Endowed Gift Amount: $_____

○ **Annual Named Scholarship**

- Minimum initial contribution = $4,000 (or $2,000/year for 2 years)
- *The scholarship must be funded for at least 2 consecutive years.*

Annual Gift Amount: $_____

Timeline

Scholarship criteria must be established and initial funding received by **April 1** for allocation in the upcoming academic year. This scholarship is expected to be awarded beginning Fall of 20 _____

PAYMENT DETAILS

Total scholarship gift pledged: $ _____

___ Please list this gift as anonymous

Payment method:

___ Cash

___ Check *(payable to the Wake Tech Foundation)*

___ Credit Card

___ Stock

___ Payment in full (attached)

___ Billed, to be paid in full within _____ years.

___ Annually $_____

___ Quarterly $_____

___ Monthly $_____

*First bill date: _____ *(m/d/yyyy)*

SCHOLARSHIP AWARD INFORMATION

Minimum award amount = **$2,000 per student recipient, per academic year**.

If multiple scholarships will be awarded per academic year, please indicate the following:

Total annual contribution: $_____ **,** to be split evenly between the **# of recipients awarded per year:** _____

- **Scholarship Name:** _____
- **Scholarship Description: We believe it is important for scholars***Reason for establishing this scholarship and a brief description of the company or individual you are honoring. This will be listed on our scholarship webpage. You can view existing scholarship examples at https://waketech.academicworks.com/donors*

DONOR INFORMATION

Donor Name/Sponsoring Organization: _____

Contact Name *(to receive scholar thank you letters)*: _____

_____ _____ ____ _____

Mailing Address City State Zip

Phone: _____ ○ Work ◉ Cell ○ Home _____ ○ Work ○ Cell ◉ Home

Email*: _____

**We will email you when your scholarship recipient has uploaded their thank you letter to the scholarship portal. You will be prompted to create a password. Then you're all set!*

SCHOLARSHIP CRITERIA

- **Academic Performance**

Would you like academic performance to be considered? ○ Yes ◉ No

If yes, please select the **required minimum GPA**: ○ 4.0(A) ○ 3.5 (B+) ○ 3.0 (B-) ◉ 2.5 (C+)

- **Academic Area of Study**

Division(s):

___Biotechnology
___Engineering, Technologies & Skilled Trades
___Business & Public Services Technologies
___Health Sciences
___ Information Technology
___ Liberal Arts
___ Mathematics & Sciences
___ Nursing
___ Public Safety Education & Training
___ Transportation Technologies

Division Program(s) of Study:

- **Other Preferences**

_____

- **Special Considerations**

Will the scholarship recipient be required to meet their donor(s), attend a meeting, etc.? ○ Yes ◉ No

Is this scholarship allowed to receive public donations (donations other than yours)? ○ Yes ◉ No

Other considerations or requests: _____

SIGNATURE

My signature confirms the information provided on this form is accurate and represents my/my organization's scholarship preferences. I understand that if a suitable candidate cannot be identified the scholarship funds may be rolled over to the next award cycle.

_____ _____

Please accept my electronic signature *Date (m/d/yyyy)*

Foundation Office Use Only

Date (m/d/yyyy): _____

Received by (staff initals): _____

Added to BAM Spreadsheet: _____

○ Curriculum ◉ WCE

For more information about scholarship guidelines and the selection process visit: https://www.waketech.edu/wake-tech-foundation/what/scholarships/scholarship-guidelines