



Saginaw Promise Zone Authority Scholarship Agreement Form

I understand that the Saginaw Promise Zone Authority Scholarship (SPZ) is a **renewable/ "last dollar"** scholarship for academic year 2021-2022. **The SPZ scholarship is available up to two academic years and may be used two semesters in given academic year (fall/winter/Spring/summer semesters); used for "tuition and mandatory fees "only.**

Please review and sign below.

1. I will attend "Information for Postsecondary Education Success Meeting" in June. (time/dates TBA).
2. **I will complete FAFSA and the Saginaw Community Foundation (SCF) Scholarship application each of the two years I want to be considered to receive a Saginaw Promise scholarship.**
3. Saginaw Promise Scholarships are available for two academic years (to be used two semesters in a given academic year (fall/winter/spring/summer semester) of postsecondary education and **must be used within six years from date of high school graduation.**
4. **The SPZ scholarship can only be used at an accredited community college, university, or technical/trade school in Michigan.**
5. **Saginaw Promise Scholarships are "last dollar" scholarships. The amount awarded is determined last and is based on what other financial aid is received, such as scholarships or grants awarded for tuition and mandatory fees. For example, if scholar attends a community college and does not receive other funding, scholarships or grants, the SPZ award will provide the tuition and fees necessary to obtain an associate's degree or its equivalent at Delta College to be used at any community college or accredited trade school in Michigan toward a 2-year degree. If you receive other funds or scholarships, the SPZ award will cover remaining tuition and mandatory fees. Size of the SPZ award will be determined by financial information provided by financial aid officer completing the Saginaw Community Foundation "General Scholarship Financial Information Form". If you plan to attend a 4-year university, and have need of funds for tuition and mandatory fees; SPZ's current award is a maximum of \$2,000 for the academic year, up to a \$1,000 per two semesters.**
6. **All Saginaw Promise scholarship payments are paid directly to the Financial Aid office of the institution I attend.**
7. **Scholarships are based on how long I have lived in the Promise Zone and how many years I have attended schools within the Promise Zone.**
8. **I will provide accurate and current contact information (email/cell phone etc.) to SPZ and SCF to enable direct communication when needed.**
9. **I will support the efforts of the SPZ with two volunteer hours, such as, with testimonials, speak and share postsecondary education experience with younger students, represent and support the Saginaw Promise in the community, such as, with community functions and/or SPZ events.**
10. **I will notify the SPZ when I have earned an associate or bachelor degree or completed a program certificate.**
11. **I must be enrolled at an accredited college, university or technical/trade school in Michigan.**
12. **I will maintain satisfactory academic progress as defined by the institution I attend.**
13. **I will request my college send a transcript to the Saginaw Community Foundation at the end of each semester as record of my continued enrollment.**
14. **I will immediately inform the Saginaw Community Foundation of any change in my status as a student or with my address, telephone number or email address. If I transfer to another college, I will provide the Saginaw Community Foundation with an official statement from that college indicating I have been granted admission.**
15. I will furnish the Saginaw Community Foundation with additional information upon request.
16. **I give permission for any college/university or trade school to release to the Saginaw Promise and the Saginaw Community Foundation any information necessary to process my scholarship.**
17. **I hereby grant permission to the Saginaw Promise and the Saginaw Community Foundation to use my name, photograph, awards received, high school, institution, graduation year, or major/minor in publication and presentations.**

I understand that failure to abide by these conditions shall constitute sufficient reasons for termination of this scholarship.

Scholar Name (First (M.I.) Last name--Print clearly) _____

Scholar Signature _____

High School (Print) _____ Year Graduated _____ Birth Date (Mo/Day/year) _____

Contact Information: Cell _____ Home Ph. _____

Email (Please provide personal email): _____

Parent Signature (if student is under 18) _____