

# Spirit of the Cats' Foundation Scholarship Fund

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/St/Zip: \_\_\_\_\_

Last grade attended at Grant-Deuel: \_\_\_\_\_

Where are you attending school: \_\_\_\_\_

What degree are you working towards: \_\_\_\_\_

Why did you choose this field: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please attach a copy of the copy of the tuition bill(s) and any completion certificates for reimbursement of up to \$2,500. You are eligible for this scholarship until the \$2,500 reimbursement is used up.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spirit of the Cats' Foundation

\_\_\_\_\_  
Date

For Foundation Purposes Only

1<sup>st</sup> Year – 2<sup>nd</sup> Semester

2<sup>nd</sup> Year – 1<sup>st</sup> Semester

Check #: \_\_\_\_\_

Check #: \_\_\_\_\_

Date Mailed: \_\_\_\_\_

Date Mailed: \_\_\_\_\_

On-Line Education or Degree Program two years or less: Tuition Bill Amount: \_\_\_\_\_

Reimbursed Amount: \_\_\_\_\_ Check #: \_\_\_\_\_ Date Mailed: \_\_\_\_\_