



# Black River Technical College Scholarship Intent



Name of scholarship donor/  
company/family/organization

\_\_\_\_\_

Name of scholarship

\_\_\_\_\_

Name of individual(s) to be  
honored with this scholarship

\_\_\_\_\_

<input type="checkbox"/> Annual amount of scholarship	\$ _____
<input type="checkbox"/> One-time scholarship	\$ _____

Schedule of award to be given:

Fall Semester	_____	\$ _____
Spring Semester	_____	\$ _____
Summer I	_____	\$ _____
Summer II	_____	\$ _____

Scholarship to be awarded to a student seeking:

_____ Associate of Arts degree (college transfer)	_____ Major
_____ Associate of Applied Science (technical degree)	_____ Major
_____ Associate of Arts in Teaching degree	
_____ Certificate (one-year) degree program	_____ Major
_____ Open selection	

Scholarship to be awarded to a:

\_\_\_\_\_ First-time entering freshman  
 \_\_\_\_\_ Second-year student  
 \_\_\_\_\_ Non-traditional student (over age 24)  
 \_\_\_\_\_ First-generation (first in family to receive college degree)  
 \_\_\_\_\_ Open selection  
 \_\_\_\_\_ Other: \_\_\_\_\_

Scholarship Criteria-Please indicate below your preferred selection process for this scholarship (i.e., student initiates application, faculty nominates, committee selects, etc):

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

<input type="checkbox"/> I give my permission for appropriate publicity of this scholarship.
<input type="checkbox"/> I prefer no public announcements regarding my role in awarding these funds.

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

Signature: \_\_\_\_\_