

SCHOLARSHIP PLANNING AND COMMITMENT FORM

Wildwood Wildcats Booster Club

Submit annually by September 20 to:

Wildwood Wildcats Booster Club

P.O. Box 417

Wildwood, FL 34785-4656

Federal Tax-Exempt Status: 501 (c)(3)

Employer Identification Number: 83-1169847

Donor Information

Name:

Contact Person:

Street:

Email:

Cell:

City:

State:

State:

Planning Details

Scholarship Amount:

☐

\$500

☐

\$1,000

☐

\$1,500

☐

\$2,000

☐

Other: \$ _____

Name of the Scholarship:

Primary Scholarship Purpose: *(Please check one or more)*

☐

To support study in a field or career path (Name: _____)

☐

To support study at a particular college, university, or tech school (Name: _____)

☐

To honor someone's legacy (Name: _____)

Frequency and Schedule: *(Please check the appropriate box and provide the requested information):*

☐

One-time scholarship

☐

Recurring scholarship gift (for the next _____ years)

☐

Multiple year scholarship support for the same student (_____ years)

Number of graduates to receive the scholarship each year: (_____ number)

Criteria for Awarding Scholarship: *(Please rank the most important criteria to be used by the committee to make the award(s).)*

Rank (1-most important, 2, 3, etc.)

☐

Academic achievement (such as: grade point, academic honors, college credits earned)

☐

Financial need (family income, living status, first-generation college-goer, etc.)

☐

Community service (volunteer hours, tasks or projects, recommendation letters describing service)

☐

Extracurricular participation (participation, leadership, and awards in sports, clubs, and school organizations)

☐

Other (Describe: _____)