



**Request to Establish An Annual Scholarship  
(Restricted or Unrestricted)**

<b>BENEFACTOR PERSONAL DATA</b>	
Benefactor Name:	
Street Address:	
City, State, Zip Code:	
Home Telephone (Evenings):	Work Telephone (Days):
Mobile Telephone:	Fax Number:
Email Address:	Best Time to Contact You? Day ___ Evening ___
PFA Alumni ___ Yes ___ No	If Yes, Years Attended _____ Year Graduated? _____

1. Name of the Scholarship Fund to be Created: \_\_\_\_\_
2. Amount of Annual Scholarship Award: \$ \_\_\_\_\_
3. Please tell us what inspired you to establish this Scholarship Fund? \_\_\_\_\_

Please name **In Memory of** \_\_\_\_\_

Please designate **In Honor of** \_\_\_\_\_

Other: Please specify any additional restrictions: \_\_\_\_\_

**4. Scholarship Eligibility Criteria:**

<p>Is there a minimum grade point average eligibility requirement? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, 2.0 <input type="checkbox"/> 2.5 <input type="checkbox"/> 3.0 <input type="checkbox"/> 3.5 <input type="checkbox"/> 4.0 <input type="checkbox"/></p>	<p>Is there a financial need eligibility requirement? Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Is there a specific major/field of study required or preferred? (Specify) _____</p>	<p>Is there a specific class status required (check all that apply)?</p> <p>Freshman <input type="checkbox"/>      Sophomore <input type="checkbox"/></p> <p>Junior <input type="checkbox"/>      Senior <input type="checkbox"/></p>
<p>Is there a gender preference requirement?</p>	

Yes  No  If Yes, Male \_\_\_\_\_ Female \_\_\_\_\_

Is there a specific geographic, church or organizational affiliation eligibility requirement?  
 Yes  No  If yes, please specify: \_\_\_\_\_

(Please attach any other Additional Documentation of Scholarship Eligibility Criteria and other benefactor/donor restrictions.)

**5. Benefactor/Donor Selection Requirements:**

<p>Do you wish to select the winner(s)?          Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Do you wish to personally interview the applicant(s)?          Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Do you wish to review the documentation on the recommended applicant(s)?          Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Do you wish to make this a  <input type="checkbox"/> One Time Only  <input type="checkbox"/> Annual Commitment (Funds must be available at least 30 days before award is given, which is September 15 and April 15 of each year based on the scholarship policy).</p>

**Note:** The Pine Forge Academy Scholarships are announced to students in the academic year in which they are awarded. The Foundation's Scholarship and Endowment Committee makes their award determinations in the Fall and Spring of each year, based upon recommendations from the PFA Administration that are received by the established deadlines.

If you wish to change your requirements or modify the endowment amount, please contact the PFA Foundation Inc. office as soon as possible to enable the Scholarship and Endowment Committee sufficient time to accurately determine the disposition of your endowment. Prior to any allocation of your endowment funds, **your fund balance must have a sufficient balance no later than 45 days prior to the planned award announcement and presentation date. All checks and future payments should be sent to the PFA Foundation Inc. office at the following address:**

**PFA FOUNDATION INC.  
 540 EAST 105TH STREET, SUITE 245  
 CLEVELAND, OHIO 44108**

All checks, money orders, certified checks, or other gifts should be made payable to the PFA Foundation, Inc. a non-profit 501C (3) organization; and specify the specific Scholarship Fund Name on the check's memo section for accurate accounting. **PLEASE DO NOT SEND CASH.** You can also make payments online through the Foundation's website.

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\_\_\_\_\_

\_\_\_\_/\_\_\_\_/20\_\_\_\_

**Signature of Benefactor/Donor**

**Date of Signing**

\_\_\_\_\_

\_\_\_\_/\_\_\_\_/20\_\_\_\_

**Signature of Board Chair/President**

**Date of Gift Acknowledgement**

**Office Use Only**

**Account#:** \_\_\_\_\_

**Date Received:** \_\_\_\_\_

**Date Established:** \_\_\_\_\_