



## Scholarship Recipient Agreement

Please return to:  
PO Box 881869  
Steamboat Springs, CO 80488  
Scan and email to: [scholarships@yvcf.org](mailto:scholarships@yvcf.org) or fax (970) 871-0431

Benefiting Student: \_\_\_\_\_

College/University: \_\_\_\_\_

Scholarship Fund: \_\_\_\_\_

Amount: \_\_\_\_\_

We are pleased to provide the financial assistance outlined above to continue your education. This scholarship is a generous statement of support for your future. Please read the following statement and sign below thus indicating your understanding of the requirements for receipt of the scholarship.

*I accept this scholarship and understand it is to be used to further my education. If, for any reason, I do not continue my education during the period of this scholarship, I will notify the Yampa Valley Community Foundation and arrange for the unused balance of the scholarship to be returned.*

Recipient: \_\_\_\_\_

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

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

College student ID: \_\_\_\_\_

Student's personal Email: \_\_\_\_\_

Address to send scholarship check (University, Financial Aid office, etc) to:

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