

## Scholarship Award Agreement

**A signed copy of this document must be returned with the application package in order for your application to be deemed complete.**

I have read the following terms and agree to be bound by them if I am selected to receive a scholarship from the . Failure to follow these scholarship award agreement terms may result in the termination of my award.

1. I understand that I am responsible for making timely submission of the application and all required documentation. Applications and supplemental materials received after the deadline may not be considered without the express approval of the Trustee.
2. I certify that the information contained in this application and all other materials submitted by me for consideration of this scholarship are to the best of my knowledge accurate and true. I also certify that the personal statement is my own work.
3. I consent to electronic delivery of documentation related to my application for this scholarship.
4. I understand that this is a competitive scholarship program. The number of recipients and the amount of each scholarship may vary from year to year due to fluctuations in the Fund's value and / or applicable document restrictions. Selections are based on information received from the application and the additional materials received by the deadline. Decisions of the committee are final and justification for recipient selection(s) by the Selection Committee, CSA, or Wells Fargo Bank staff will not be disclosed under any circumstances.
5. The scholarship grant is subject to your agreement to use the funds for tuition and fees required for the enrollment or attendance at the institution or in the program during the 2019-2020 academic year. The scholarship award may be applied to fees, books, supplies and equipment required for your courses of instructions. The scholarship be applied to room, board or other expenses. I understand that I must be a full-time student after high school to be eligible for this scholarship. Unless I am enrolled full-time in a course of study by January 1, 1970, I understand that my scholarship may be terminated. Under special circumstances, individual exceptions may be made to the full-time enrollment by January 1, 1970 date requirement, at the discretion of the . Any unused funds will be returned to the scholarship fund.

### **6. Award disclosure authorization:**

I give Wells Fargo Bank/CSA permission to disclose award information to my high school and/or college for the purpose of publication or announcement at an award ceremony and permission to list my name as a scholarship recipient on the Wells Fargo Bank/CSA website if I am chosen as a recipient.

I decline to give Wells Fargo Bank/CSA permission to disclose award information to my high school and/or college for the purpose of publication or announcement at an award ceremony and permission to list my name as a scholarship recipient on the Wells Fargo Bank/CSA website if I am chosen as a recipient.

7. The Foundation reserves the right to withdraw the Scholarship if the recipient is found to have made false or misleading statement to obtain the award, diverts scholarship funds from their intended purpose, fails to maintain satisfactory academic progress, engages in misconduct or a violation of the School's Code of Conduct, or engages in conduct that is illegal and results in a criminal conviction. The decision of the is final.
8. I certify that I am not related to any of the following as a spouse, child, great grandchild:
  - a. Current scholarship selection committee members, Wells Fargo Bank employees, CSA employees and their spouses.
  - b. The donor who funded the scholarship fund.
9. I understand that, if chosen as a scholarship recipient, I must return the Scholarship Payment form by the deadline date of January 1, 1970. Failure to return required paperwork by the deadline will result in permanent loss of the scholarship.

I have read the above terms and certify that I am eligible to apply for a scholarship and that I will abide by these terms.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

PRINT NAME \_\_\_\_\_