

AWARD CREATION FORM

The Los Angeles City College Foundation is a 501(c)(3) Corporation dedicated to providing the students and faculty at Los Angeles City College with educational assistance in the form of financial aid, facilities, and services. The recipient of the award be selected: By the Departmental Scholarship Committee

1. Name or designation of award:

2. State the purpose of the award:

3. Amount of donation: \$_____ (minimum donation is \$5,000.00)

4. Award qualifications:

Minimum G.P.A. _____ Specific Major/Dept: _____

Minimum Semester Units _____ Univ. Transfer Student _____ When? _____
Essay Required

Other qualifications _____

***Award qualifications must follow Educational Code 35316 which states, " An applicant for a loan from the fund shall make application therefore in accordance with reasonable rules and regulations established by the governing board of the school district, provided that such rules and regulations shall not include any conditions limiting eligibility on account of race, creed, or country of origin".**

5. Awards are to be awarded (please check/fill in the appropriate selection):

Fall Semester: _____ Spring Semester: _____ Both: _____

Number of awards to be given per semester: _____

Please specify the amount to be given per semester per award (min award \$500/semester):

\$_____

Can the LACCF specify a different amount if necessary? Yes No

L A C C F o u n d a t i o n : A w a r d C r e a t i o n F o r m

6. May other persons or organizations donate to the award?

Yes: No:

7. May we release publicity on the award donor?

Yes: No:

Attach
Photo
Of
Donor
Here

8. Please share the story associated with the establishment of this award.

*This is an un-endowed scholarship award that will be awarded each year until the funds are depleted.
Therefore:*

- *The funds associated with the award will not be invested, but kept in a liquid account to ensure proper distribution.*
- *In order for the award to be dispersed continually on a yearly basis, the donor must replenish the funds periodically.*
- *This document may be amended with the unanimous agreement of the Chair and faculty of the department or program with the approval of the Executive Director of the Los Angeles City College Foundation.*

L A C C F o u n d a t i o n : A w a r d C r e a t i o n F o r m

All checks or properties should be made payable to:

LOS ANGELES CITY COLLEGE FOUNDATION or LACC FOUNDATION

Title (select one): Dr. Mr. Mrs. Ms.

Donor's Name (Please print):

_____	_____	_____
First Name	Middle Name	Last Name
_____		_____
Donor's Signature		Date
_____		_____
Address		City, State & zip code
_____	_____	_____
Email	Telephone Number	Alt number

Donation Accepted by:

_____	_____
Martha C. Esparza, Executive Director	Date