MEMORANDUM

DATE: _______________________

TO: TONALEA CHAPTER ADMINISTRATION

FROM: ________________________, College Recipient

Subject: Understanding of Obligations for:

Scholarship and Financial Assistance Awards
Chapter Scholarship
Financial Assistance Policies and Procedures

I, ____________________________, have read and understand the Chapter Scholarship and Financial Assistance Policies and Procedures.

I, ____________________________, understand that upon my award of the Chapter Scholarship and Financial Assistance, I am obligated to utilize the funds for my educational expenses as specified in the Chapter Scholarship and Financial Assistance Policies and Procedures. I also understand that as specified in the Chapter Scholarship Policies and Procedures that I will be obligated to repay the awarded funds if I misuse the funds or if I withdraw from the school unofficially and without notification to the Tonalea Chapter.

___________________________________________
Student Signature                 Date

___________________________________________
Parent Signature (if minor)        Date

Chapter Manager: Marlinda Whiterock
Administrative Assistant: VACANT