

Scholarship Fund Agreement

Community Foundation of West Texas
www.cfwtx.org

Establish a New Fund
 Update Fund Information

Name of Fund

e.g., *Smith Family Fund* or *Horizon Fund*

Affiliate: _____

Primary Contact Information

Name _____ Male Female

Mailing Address _____ Home Business

City _____ State _____ Zip _____

Business Phone _____

Home Phone _____ Mobile Phone _____

Email Address _____

Company Name _____

Title _____

Date of Birth _____

For Internal Use Only
 Establishing Donor Founder

Additional Contact Information

Name _____ Male Female

Mailing Address _____ Home Business

City _____ State _____ Zip _____

Business Phone _____

Home Phone _____ Mobile Phone _____

Email Address _____

Company Name _____

Title _____

Date of Birth _____

For Internal Use Only
 Establishing Donor Founder

Referral Information

Referred to Community Foundation by _____

Relationship _____

Professional Advisor's Company and Title _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Scholarship Fund Agreement

Scholarship Selection

Scholarship funds further or carry out the educational and charitable uses and purposes of The Community Foundation and are created to provide financial assistance for selected students to aid in their collegiate, post graduate or other advanced education. Scholarship funds may be used for the payment of tuition, fees and books.

Scholarship Funds provide educational opportunities for individuals chosen by the Community Foundation. The selection process may include consideration of recommendations made by an appointed Advisory Selection Committee. The donor or persons related to donor may not control, either directly or indirectly, the selection of candidates and may not constitute a majority of the selection committee.

___ The following individuals will serve as initial members of the Advisory Selection Committee for this Scholarship Fund:

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Scholarship Criteria

Donors establishing Scholarship Funds in the Foundation may suggest certain reasonable criteria and conditions for the award of grants from their Fund. Such criteria may reflect the special interests of the Donor and might, for instance, restrict scholarship awards to graduates of certain high schools, residents of certain geographic areas, students pursuing certain career objectives or attending particular universities, etc. Donors may also wish to suggest one, two or four year awards.

The donor hereby suggests and the Community Foundation accepts the following guidelines and criteria for the granting of awards from this Scholarship Fund:

Scholarship Distributions

Scholarship awards shall be in the sole discretion of the Community Foundation which, among other factors, shall consider the assets available in the Fund for such purposes. The Donor recommends the following guidelines for scholarship distributions:

- ___ Scholarship distribution amounts will be based solely on the Community Foundation's spending policy
- ___ Scholarships will be awarded in the amount of \$ _____ per school year.
- ___ No recipient shall receive more than a total of \$ _____ over a _____ year period.
- ___ A scholarship may be renewed for up to _____ years provided that the recipient maintains a GPA of _____ and a class schedule of at least _____ hrs. per semester.
- ___ Other:

Scholarship Fund Agreement

Fund Creation

Initial gift to establish a fund: \$ _____

Check made payable to Community Foundation of West Texas

Securities
 Publicly Traded Privately Held* Restricted*

Wire*

Other*

Please describe the gift (interfund transfer, credit card, personal property, real estate, testamentary):

**Additional information will be required. Please contact the Community Foundation at (806)762-8061.*

The Donor has chosen to utilize an **Acorn Fund** plan to create this Scholarship Fund. Required documentation has been completed and is attached to this agreement.

Community Endowment Fund

The Community Endowment Fund (discretionary fund) is a permanent charitable resource that grows through your support and provides invaluable funding to local nonprofit organizations. When you give to the endowment, you are helping to meet the needs of our community today and for years to come by supporting Lubbock and the South Plains area in perpetuity.

I would like to make an additional gift to the Community Endowment Fund: \$ _____

Total gift to the Community Foundation:

\$ _____

Investment

Contributions to funds at the community foundation are managed in the community foundation's general investment pool. The general investment pool is carefully constructed and diversified to maximize return and minimize volatility. As stewards of over \$30 million in assets, our size provides access to world-class investment managers and investment strategies only available to large institutional investors. Investments are monitored regularly by the community foundation's experienced investment committee and staff.

The Community Foundation offers donors the opportunity to recommend a trusted investment advisor to manage donated assets of \$500,000 or more through its Individually Managed Fund program.

I would like to request an Individually Managed Fund and have completed the form.

Donor and Fund Recognition

The Community Foundation includes information about fund advisors, grantees and funds in our newsletters, website and other printed and online materials. If you do not wish to be recognized, please indicate your preferences below:

Do not list my name on donor listings.

Do not include the name of this fund on fund listings.

Grantmaking

Each scholarship is mailed with a custom award letter. Specify below how you would like the name(s) of the fund founder(s) and/or honoree(s) to appear in the award letter:

e.g., Mr. and Mrs. Mark Smith, Jane and Mark Smith, The Smith Family

Students that have received scholarships may wish to send information to you directly. Please indicate your contact preference (select one):

Provide my home address.

Provide my business address.

Do not provide my address.

Please make all awards from this fund anonymous.

Scholarship Fund Agreement

Acknowledgement and Signatures

I acknowledge that I have read the Community Foundation of West Texas Scholarship Policy, Support Fees and Minimums and Fund Terms and Conditions and agree to the policies, fees, terms and conditions described therein. I understand any contribution, once accepted by the community foundation's board of directors, represents an irrevocable gift to the Community Foundation of West Texas. The Community Foundation's board of directors has variance power under IRS regulations and this gift is not refundable to me.

I hereby certify, to the best of my knowledge, all information presented in connection with this form is accurate, and I will notify the Community Foundation of West Texas promptly of any changes.

Signature

Signature

Print Name

Print Name

Date

Date

Community Foundation of West Texas Signature

President Signature

Date

Print Name

Authorized Board Member Signature

Date

Print Name

Title

Special Instructions:

Please return this form to:
Community Foundation of West Texas
6102 82nd Street; 8b
Lubbock, TX 79424
Phone: (806)762-8061
Email: michelle@cfwtx.org

<p>Planned Gifts</p> <p><input type="checkbox"/> I have remembered the Community Foundation in my estate plans.</p> <p><input type="checkbox"/> I would like more information on how to include the Community Foundation in my estate plans.</p>
