## Sequim Education Foundation Restricted Funds Account

# Scholarship Award Claim Form

Amount of Award \$	Nam	ne of Scholarsh	ip Award			
This form is used for students Only persons who have receive an award.						
To claim your scholarship awar or technical school you will be grade transcript as well; <b>4)</b> Mail	attending; 3) Studen	ts claiming Ren	ewable Scholarships mus	t include current		
Your scholarship award check to attend in your name with y attending.						
Your name a	nd student ID # must be en	tered as it will be use	ed for identification purposes.			
	AWA	RD WINNER				
Name						
Name:						
Birth Date:	Parent Contac	ct Name		_		
Street:						
City:	s	tate:	_ Zip Code:			
Telephone:	E-mail:		· · · · · · · · · · · · · · · · · · ·			
U	NIVERSITY, COLLEC	GE, OR TECHNI	CAL SCHOOL			
Name of Institution:		Student ID #				
Street/PO Box:						
City:		State:	Zip Code:			
REQUIRED CERTIFICATION						
Please read the following info	ormation carefully, and sign	below. You must si	ign below or your claim will not be p	rocessed.		

## **GENERAL LEGAL IMPLICATIONS**

The scholarship award recipient, acknowledges that:

- All scholarship awards and earnings are owned by Sequim Education Foundation (not me) until I direct the funds to be paid for qualified higher education expenses on my behalf at an eligible education institution;
- My right to claim a scholarship award or use it to pay qualified higher education expenses at the educational institution I will be attending cannot be transferred to anyone;
- · Neither the scholarship award nor earnings will be considered an asset of my estate if you were to die;

- This scholarship award is a one-time payment limited to the amount shown on the face hereof according to the provisions of the applicable Sequim Education Foundation (SEF) Scholarship Trust funding this award;
- The scholarship amount paid can only be used for qualified education expenses at an eligible educational institution as defined by the Internal Revenue Service. (See IRS Publication 970):
- Scholarship funds disbursed, but not used for qualified education expenses shall be returned to Sequim Education Foundation (SEF). Said funds shall be returned to the SEF Awarded Unpaid Scholarships Account Fund for recipient's subsequent use;

On October 1<sup>st</sup> of the third year after graduation, recipient shall forfeit all right, title, and interest in funds remaining in the *SEF Awarded Unpaid Scholarships Account Fund* in his/her name; EXCEPT, that, recipients with military service extensions shall forfeit rights to funds in their name on the first day of October of the fifth year following their graduation.

#### LOSS OF SCHOLARSHIP FUNDS

I acknowledge that the following circumstances will result in the loss of my scholarship award plus any applicable earnings:

- I fail to graduate from high school, or choose not to attend an eligible educational institution;
- I do not have qualified educational expenses;
- I die; I become disabled such that I can never attend an eligible education institution;
- I fail to claim my scholarship award by September 30<sup>th</sup> of the third year after my high school graduation, EXCEPT, that, persons in active military service may receive a two year extension of aforesaid expiration date provided written request is made prior to September 30<sup>th</sup> of the third year after my high school graduation;
- · I am found to have provided false or misleading information in claiming the award;
- I was misidentified as being eligible to receive an award.

#### **RETURN OF WITHDRAWN FUNDS**

I acknowledge that I must return to Sequim Education Foundation any portion of the scholarship funds refunded to me, or to anyone on my behalf and not immediately used for other qualified educational assistance, to be deposited into my SEF Student Scholarship Account.

### **CERTIFICATION**

I certify that:

- I have read this form and I agree with all its terms and conditions;
- I certify that I am the individual identified by the information provided on this claim;
- I agree that, if requested, I will submit my school records as evidence of attendance;
- I understand that, if at some later date it is determined that any of my certifications are false or inaccurate, or that any claim information that I provided is false or inaccurate, my scholarship and any applicable earnings will be forfeited and immediately returned to Sequim Education Foundation.

I acknowledge by signing below, that I have read, reviewed, understand and agree to the terms and conditions and provisions in the paragraphs above.

Eligible Scholarship Award Recipient's Signature	Date	
Parent or Guardian's Signature if Award Winner Under 18 Years Old	Date	

We will not disclose your information. The personal information that you provide in the scholarship award claim will not be disclosed to anyone without your written consent unless the information is authorized or required by state or federal law.