

## Oregon Grand Prix Scholarship Program Request for Funds

	dian requesting fun				
Address:		City	State	Zip	
			Phone:		
Center bowled	at				
	_				
AddressContact Phone					
Contact Phone		AT	tn:		
		d request according to the interest accordin			
<b>Donor Contact Information</b>		1	<b>Student Information</b>		
Donor contact name	Oregon Grand Prix Scholarship Foundati	on Student's full na	ame		
Address	500 West C St Silverton, OR 97381	Student ID o last 4 of SSN			
phone number	(503)509-1174	Student phor number	ie		
e-mail	oregongrandprix@gn	nail.com Student e-ma	iil		
Disbursement Instructions					
Terms to apply	□ Fall 201_ □ Winter 201_ □ Spring 201_ □ Summer 201	_ (Mark one o	ceeds:	rn to Oregon Grand Prix y to future enrollment	
Itemization of charges covere (Mark all that apply)	I dition		nt □ Part- □ Cred	ime enrollment time enrollment it courses only r:	
Furthermore, I under meet the terms requ	erstand that a representa ested. So long as the col r inappropriate use of the	ts best to administer the fundative of Grand Prix will contact relege is acting in good faith in foller funds by the scholarship recipions.	ne/us in advance of dowing these instruction	isbursement if unable to ns, I/we agree to hold the	
X(Signature of	f Authorized person request	ing funds)	(Date)		