



Named Scholarship Agreement & Guidelines

Thank you for your interest and support of students in SAISD! This form is to facilitate the acceptance of scholarship funds to be awarded by the SAISD Foundation on your behalf and to assist San Antonio ISD in recruiting students for this scholarship.

1. Name of Scholarship: _____
2. Please indicate how you would like this gift acknowledged on our website:

3. Given by: _____
4. Total amount of each scholarship award: _____
5. How many scholarships will be given annually? _____
6. For how many years is each scholarship awarded? _____
7. Minimum GPA to retain scholarship: _____

(Students who fail to maintain the minimum GPA requirement or are not a full-time student (9+ hours) will be on probation/deferment until the following semester assuming the GPA has improved or full-time status has resumed.)

8. Purpose of scholarship:

9. Is scholarship benefiting a specific school, specific program or District-wide? _____
10. If the scholarship is for a specific school, please list school name: _____
11. Please list any specific criteria for all scholarship awards. This may include area of study, GPA, income, or special interests.

12. Please list any additional information to ensure the scholarship is managed within the donor's intent.

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Donations can be made payable to the San Antonio Foundation for Excellence in Education, Inc. dba SAISD Foundation with the fund name listed in the memo line and mailed to 2411 San Pedro, San Antonio, TX, 78212. Please note the SAISD Foundation operates as a 501(c)(3) Organization under Tax ID # 74-2861587. Arrangements can be made to accept credit cards and/or payments online.

I understand that these funds will be kept in a restricted fund by the SAISD Foundation for the purposes outlined above. I also understand that there will be a ~~one-time set-up fee of \$250~~ and a \$100 yearly maintenance fee going forward. In case of inactivity, restricted funds will revert to the SAISD Foundation general scholarship fund for SAISD students after 24 months. Restricted purposes can be amended by an authorized person of this account by written request via mail, fax or email at any time.

If the scholarship is not funded by January 31st of each year it will be suspended until the next year and will be removed from our website until funds are received.

I verify that this document accurately reflects the intentions of the scholarship I have created.

Thank you for investing in the students of SAISD!

Reporting regarding this scholarship should be sent to the following person/s.

Name: _____ Address: _____

Email: _____ Phone: _____

Signature: _____ Date: _____

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