



NEELY
FOUNDATION

325 South Higley Road
Suite 110
Gilbert, Arizona 85296
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F 480.941.1601

Attestation Statement

I have read and understand the terms and qualifications upon which the Otto & Edna Neely Foundation Scholarship has been awarded to me. I will promptly notify the Executive Vice President if I should no longer meet the above qualifications or if I do not plan to use the scholarship in the future. In addition, I will promptly notify the Foundation of any change of address during the term of this scholarship. Finally, I authorize any college or university I attend to release my academic and contact information to the Executive Vice President for the purpose of monitoring and/or determining my eligibility for this Scholarship.

Signature

Printed Name

Date



Scholarship Renewal Information Statement

Full Name High School

Address Cell Phone

City State Zip Code

Email

Previous Academic Year

College Attended Degree

Number of Hours Completed

Grade Point Average

Fall Semester

Spring Semester

Total

Fall Semester

Spring Semester

Cumulative

A COPY OF YOUR UNOFFICIAL TRANSCRIPT MUST ACCOMPANY THIS FORM

Upcoming Academic Year

Based on the Qualifications for the Scholarship, are you eligible for continued assistance? Yes No

Do you plan to attend college as a full-time student this year? Yes No

Have you registered for classes? Yes No

College Attending Degree

Signature

Date