



## Scholarship Reporting Form

**Instructions:** This form, along with a completed Disbursement Request Form, should be submitted at the time you want the scholarship payment to be made. This form must be filled out completely. The Selection Committee Chair must sign and date the form before submitting to the Nebraska Community Foundation.

**To comply with IRS reporting requirements, the Nebraska Community Foundation requires a separate reporting form for each scholarship awarded by your fund.**

Name of Scholarship Fund: \_\_\_\_\_

Selection Committee Chair: \_\_\_\_\_ Phone: \_\_\_\_\_

Names of Selection Committee: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Scholarship Recipient Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Social Security No. \_\_\_\_\_

Residence Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Award Amount: \_\_\_\_\_

College/University: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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How was the scholarship recipient selected? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Relationship, if any, between the recipient and any member of the selection committee, affiliated fund advisory committee, or scholarship donor: \_\_\_\_\_  
*(if none, write NONE here)*

**Selection Committee Chair:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
*(signature)*

**Please sign and return this form to: Nebraska Community Foundation  
P. O. Box 83107 • Lincoln NE 68501 • (402) 323-7330 • Fax (402) 323-7349**