



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: _____

Scholarship Recipient Name: _____

Phone: _____

Student ID _____ or Date of Birth (only if Student ID Number not known) _____

Residence Address: _____ City: _____

State: _____ Zip: _____ Award Amount: _____

Apply To:	<input type="checkbox"/>	Fall semester only
	<input type="checkbox"/>	Spring semester only
	<input type="checkbox"/>	Split equally Fall/Spr.
	<input type="checkbox"/>	Other _____

College/University _____

Mailing Address: _____

Phone: _____ Email: _____

How was the scholarship recipient selected?

By checking the box, the Selection Committee Chair certifies that no Scholarship Selection Committee member is a family member (as defined in the Scholarship Policy & Guidelines) of the scholarship recipient. Contact NCF before awarding this scholarship if there is a family relationship between a Scholarship Selection Committee member and a proposed scholarship recipient.

Selection Committee Chair: _____ **Date:** _____
(signature)

This Form may be photocopied. It is also available on the NCF website nebcommfound.org/resources/forms

Please sign and return this form with a completed Disbursement Request form to: Nebraska Community Foundation
P. O. Box 83107, Lincoln NE 68501 | Fax 402.323.7349 | Email info@nebcommfound.org

