

Awarded: March 20, 2018

Date:

Terms of Scholarship Form

Congratulations on your effort to apply for an ACE Mentor Program Scholarship. Please read the following terms of scholarship in the event that you are awarded one of them.

- 1. Fields of study covered by this scholarship are architecture, engineering, construction, and related disciplines, as approved by the ACE Mentor Program of America and/or a scholarship recipient's local ACE affiliate.
- 2. A check will be issued in the fall of each year, in the amount of one-fourth of the scholarship award. This payment shall be made in four consecutive annual installments, or at a minimum of \$1,000 per check, or until the student graduates from a four-year program, whichever comes first.
- 3. The Student must return this signed Terms of Scholarship Form. In addition, the student shall submit a disbursement form completed by both the student and the college for each year of scholarship in order to receive payment.
- 4. The student may change colleges without affecting this scholarship, but must notify the ACE Mentor Program and the transfer and adhere to all other terms.
- 5. To avoid forfeiting the remainder of the scholarship, the student must remain in good academic standing, continue in a field of study covered by ACE, and annually provide a disbursement form and transcript to ACE.
- 6. It is the student's responsibility to provide ACE with the required information each year.
- 7. The student must accept the terms of this scholarship and initiate disbursement of scholarship funds within two years of graduation from high school. If the scholarship is not accepted and payments are not initiated after two years, the scholarship will be forfeited.
- 8. Once the first installment of scholarship is paid, the student must use the remaining funds within a period of five years. Any funds remaining after five years will be forfeited.
- 9. Student must use full amount of the scholarship within seven years of graduation from high school. Any funds remaining after this period will be forfeited.

I have read and I understand the above terms.

Name (printed):

Email address:

Phone number:

Signature: _____

ACE Mentor Program of Twin Cities

TwinCitiesMN@acementor.org

www.acementor.org | or contact Derek Van Heuveln 651-789-4656



Year ____:___

Student Information (To be completed by student. <u>Print neatly</u>)						
Last Name	First		. Social Security No.			
I hereby give ACE Mentor Program the ability to check my academic records each year(Initial)						
<u>Perman</u> Street	ent Address A	Apt.	Street	<u>Address</u>	at School	Apt.
City State	Zip		City	State	Zip	
Phone			Phone			
Institution Information (To be completed by the institution)						
Institution Name:						
Attention of:						
Department:						
Address:						
City:Zip:Zip:						
Make check payable to:						
Student's Major:						
Is student in good academic standing? (Not applicable for freshmen students)						
I understand that the information provided above will be used in determining whether the student remains eligible for an ACE scholarship, and I certify that the information provided above is correct.						
Authorized Signature						
Printed Name:						
Title:						
Date:						

RETURN FORM TO: ACE Mentor Program of the Twin Cities

TwinCitiesMN@acementor.org

Contact: Derek Van Heuveln 651-789-4656 www.acementor.org