ISC Scholarship Assurances

The applicant is a citizen of the United States.

The applicant is a full time student, making satisfactory progress in an institution of higher education.

We, the undersigned have read the ISC Scholarship eligibility requirements and agree to all stipulations which apply to the award for which application is being made. Further, we understand that it is our responsibility to notify ISC of any change in status that may affect the applicant's eligibility. Should the applicant become ineligible, the amount of the scholarship owed will be prorated for the period of ineligibility. We agree to refund the amount owed in a timely manner if the applicant becomes ineligible. We understand that the decision of the state committee in the selection of the scholarship is final.

Applicant Name (Please Print) _____

Applicant's Signature _____ Date _____

Parent's/Guardian's Signature _____ Date _____

NOTE: Award checks cannot be mailed to the financial aid office of the scholar's institution of higher education.

Mailing address for award check & future correspondence _____

_____

_____

Institution of higher education that applicant will be attending for school year 2008-2009:

_____

This institution is: ___ Public __ Private and is located in: __WY, __CO, __UT, __ID, __MT __ND, __SD, __NE

Return this form to the address below:

Mr. John Palley
ISC
401 East E Street
Casper, WY 82601