



Scholarship Renewal Form

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Name of scholarship to be renewed: _____

Year scholarship was first awarded _____

School currently attending and address - please note that the scholarship check will be sent directly to the school. Please give a detailed address to where check should be sent in order to receive proper credit _____

Student ID number: _____

Please indicate name and amounts of any other scholarships and/or financial aid that you are receiving: _____

Signature of applicant: _____

Please attach a copy of your most recent transcript and a copy of your class schedule or bill for the fall semester.

Mail or bring transcript to: The Troy Foundation
Attention: Lisa Reynolds
216 W. Franklin Street
Troy, OH 45373

A scanned copy may be sent to lreynolds@thetroyfoundation.org or faxed to (937) 339-8935.

Please allow at least 2 weeks from the time our office receives this form for your check to be processed and received by the school. Applicants will be notified if the renewal is not approved.