



## 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](mailto: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.