## BUCK FOUNDATION UPPERCLASSMEN SCHOLARSHIP APPLICATION SIGNATURE PAGE

Please read the following statements carefully. Your signature indicates that you have read, understand and agree to the following statements.

## **BUCK FOUNDATION SCHOLARSHIP TERMS OF AGREEMENT**

I understand that by accepting a Buck Foundation scholarship that I am required to abide by the following terms of the scholarship and that I accept all terms of the scholarship. As noted below, I understand that my failure to follow these terms may result in the revocation of my scholarship.

- If I fail to complete a semester I may be asked to refund any payment made during that 1. semester.
- 2. Any anticipated changes made after the application process must be reported to Jan Buck (925-2597) prior to making the change. That includes change of college, major, dropping a class which would affect minimum hours required per semester and/or any similar circumstances.
- 3. Funds are to be used for the next two college semesters for upperclassmen and discretionary/merit awards. Scholarship payments for renewable awards will be paid each semester for eight consecutive semesters (fall and spring).
- 4. A minimum 2.5 grade point is required for each semester. A minimum of 12 hours is also required per semester. These requirements may be waived upon written appeal. In that event, a probation period will be instituted.
- I understand the Rogers Development Foundation administers scholarship 5. payments for the Buck Foundation. A list of RDF requirements is posted on their website, <u>www.rogerslowell.com</u>. Questions regarding claiming scholarship funds may be addressed to Rogers/Lowell Chamber of Commerce, Scholarship Coordinator.
- 6. I understand funds will not be released until all paperwork is received by the RDF and that all scholarship payments will be made directly to my college.
- 7. At the end of each academic year I must submit a written account of my college experience to Jan Buck at the address listed below.
- 8. I certify that, to the best of my knowledge, the information on this application is accurate and complete and that the signature below is valid. I understand that should my signature be found invalid, my application will be removed from consideration. I also certify that I understand the information contained in this application will be made available to the scholarship selection committee, including all information on my transcript.

I understand and agree that the Buck Foundation reserves the right to revoke my scholarship in its sole discretion:

- (A) if I fail to meet any of the terms of the scholarship (including but not limited to the above specific terms);
- (B) if I break the law;
- (C) if I am disciplined by, expelled or suspended from my college or university;
- if I engage in any conduct, or fail to take an action, which reflects detrimentally upon the (D) Buck Foundation as determined in the sole discretion of the Buck Foundation.

SIGNATURE PRINT NAME

DATE

Sign and date a hard copy of this form. It may be mailed (Jan Buck, 15249 Dutchmans Drive, Rogers, AR), faxed (479-925-1256) or emailed as an attachment (jan@buckforscholarships.com). Also submit a copy (official, sealed transcripts are not required) of your most recent college transcript SHOWING ALL CLASSES TAKEN THROUGH FALL 2014 and your HIGH SCHOOL TRANSCRIPT.