L.I.F.E Degree Completion/Scholarship Renewal Program Form

Name:		Email:		
Phone:		College:		
College Address (where che	eck should be sent):			
Please list all donation infor	mation below:			
1. Donor name:	Date:	Total	Total value of donation:	
☐ General donation (online)	☐ General donation (check	Sponsorship	☐ Raffle Tickets# sold	
2. Donor name:	Date:	Total	Total value of donation:	
☐ General donation (online)	☐ General donation (check	Sponsorship	☐ Raffle Tickets# sold	
3. Donor name:	Date:	Total	Total value of donation:	
☐ General donation (online)	☐ General donation (check	Sponsorship	☐ Raffle Tickets	
4. Donor name:	Date:	Total	Total value of donation:	
☐ General donation (online)	☐ General donation (check	Sponsorship	☐ Raffle Tickets# sold	
5. Donor name:	Date:	Total	Total value of donation:	
☐ General donation (online)	☐ General donation (check	Sponsorship	☐ Raffle Tickets# sold	
6. Donor name:	Date:	Total \	Total value of donation:	
☐ General donation (online)	☐ General donation (check	Sponsorship	☐ Raffle Tickets# sold	
7. Donor name:	Date:	Total \	Total value of donation:	
☐ General donation (online)	☐ General donation (check	Sponsorship	☐ Raffle Ticket# sold	
		Total Value of A	Total Value of All Donations:	

Great job! Thank you for your participation and congratulations on securing additional Scholarship funds. We will contact you when your application has been processed.