



## Portland Community College

### SCHOLARSHIP DONATION GUIDELINES

Thank you in advance for your upcoming scholarship donation. Following are guidelines to help ensure that any student you sponsor receives the highest level of service that we can provide. Please review this information and share it with any people in your organization who may deal with any aspect of this PCC scholarship in the future.

#### GENERAL INFORMATION

- **Priority of Payment:** Unless otherwise specified, scholarship payments apply first to college charges before funds will be transferred to the PCC Bookstore for purchase of books and supplies.
- **Letter of Instruction:** To ensure that the donation is applied in accordance with the donor's wishes, a letter of instruction is required. The letter needs to contain:
  - Donor contact information - Name, mailing address and phone number
  - Student Name (First, MI, Last)
  - PCC ID number and/or social security number
  - Term/s covered
  - Amount per term, if multiple
  - Specific charges to be paid. Common fees include:
    - Tuition and registration fees
    - Parking permit
    - Books and/or supplies
  - Restrictions or Conditions
    - Prior academic performance (i.e. minimum GPA)
    - Enrollment requirements, if any (i.e. Full/Part time, credit courses only)
  - Disposition of any amount above the specified charges
    - Refund to donor
    - Pay to student
    - Carry forward to next term
- **Cancellation:** Scholarships may only be cancelled prior to the beginning of term. Please submit requests in writing and allow 30 days for processing.
- **Bookstore Authorizations:** Students wishing to charge books must contact the scholarship specialist to request a Bookstore Authorization prior to the 4<sup>th</sup> week of the term. Authorizations are remitted to the bookstore no earlier than three weeks in advance of the term.
- **Unofficial Requests:** Students will be referred to donor for any request that is not specified in the letter of instruction. New donor instructions will be required in writing.

## DELAYED SCHOLARSHIPS

- Scholarships on behalf of PCC students are accepted throughout the term. If the donation and letter of instruction are received after the 2<sup>nd</sup> week of term, the student is likely to have a late payment penalty. Please specify in your letter of instruction if this is to be covered by the scholarship.

## ON-LINE REFERENCE

- Term start and end dates: <http://www.pcc.edu/pcc/csr/default.htm>
- Tuition and Fee schedule: <http://www.pcc.edu/pcc/fin/default.htm>

## CONFIDENTIALITY

- **IMPORTANT:** In accordance with federal and state confidentiality laws, grade, registration and account information will be released only upon receipt of the student's written consent to release the confidential information.

## CONTACT INFORMATION

Contact Name: Nancy  
Mailing Address: Portland Community College  
Attn: Scholarship  
722 SW 2<sup>nd</sup> Avenue  
Portland, OR 97204-3102  
Phone: 971-722.2703  
Fax: 971-722.2878  
Taxpayer ID/Type 93-0575187 Municipal Organization

## GRADES & ENROLLMENT VERIFICATION

- Grades and enrollment verification are provided by the National Student Loan Clearing House. PCC staff members are unable to provide this information.
- Students may access this information free of charge via the PCC student web.
- Inquiries by a third party are provided at a cost of \$2.50 per request by accessing the National Student Loan Clearing House website at: <https://www.studentclearinghouse.org/>

## PAYMENT INSTRUCTIONS

- Scholarship donations should be received before the term begins.
- Make checks payable to: **Portland Community College and mail them to the contact address above.**
- Please write the student name and PCC ID number in the memo line.

## Letter of Instruction Disposition of Scholarship Donation

To Whom It May Concern:

It is our desire to open a private scholarship fund for benefit of the student designated below. Enclosed is a check made payable to Portland Community College (PCC) in the amount of \$\_\_\_\_\_. to be used for this sole purpose.

Please establish the scholarship fund according to the instructions designated below:

Donor Contact Information		Student Information	
<b>Donor contact name</b> (required)		<b>Student's full name</b> (required)	
<b>Donor address</b> (required)		<b>Student ID or SSN</b> (required)	
<b>Donor phone number</b> (required)		<b>Student phone number</b> (optional)	
<b>Donor e-mail</b> (optional)		<b>Student e-mail</b> (optional)	

Disbursement Instructions			
<b>Terms covered</b> (Mark all that apply)	<input type="checkbox"/> Fall 200__ <input type="checkbox"/> Winter 200__ <input type="checkbox"/> Spring 200__ <input type="checkbox"/> Summer 200__	<b>Disposition of excess proceeds:</b> (Mark one only)	<input type="checkbox"/> Pay to student <input type="checkbox"/> Return to Donor <input type="checkbox"/> Apply to future enrollment
<b>Itemization of charges covered</b> (Mark all that apply)	<input type="checkbox"/> Registration fees <input type="checkbox"/> Books <input type="checkbox"/> Supplies <input type="checkbox"/> Parking Permit <input type="checkbox"/> Monthly Tri-Met Pass <input type="checkbox"/> Penalties or Fines <input type="checkbox"/> Other: _____	<b>Restrictions</b> (Mark all that apply)	<input type="checkbox"/> Full-time enrollment <input type="checkbox"/> Part-time enrollment <input type="checkbox"/> Credit courses only <input type="checkbox"/> Minimum GPA ____ <i>(at time of enrollment only)</i> <input type="checkbox"/> Other: _____

I/we understand that Portland Community College will do its best to administer the funds according to the instructions listed above. Furthermore, I understand that a representative of PCC will contact me/us in advance of disbursement if PCC is unable to meet the terms requested. So long as the college is acting in good faith in following these instructions, I/we agree to hold the college harmless for inappropriate use of the funds by the scholarship recipient or his/her failure to attend or complete the required course work.

X \_\_\_\_\_ (Signature of Authorized Donor) \_\_\_\_\_ (Date)