

**Scholarship Participation
Deadline:**

August 02, 2010

**FAPSC Scholarship
Participation Agreement**



Note: a separate form must be completed for each campus. Please print clearly or type. If additional forms are necessary, please photocopy or visit our website www.FAPSC.org.

INSTITUTION INFORMATION:

Name of Participating School/College: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Website: _____

AUTHORIZATION INFORMATION: The institution's owner or campus president/director must sign below to authorize FAPSC to include your school and list scholarships in the FAPSC Scholarship Program.

Name: _____ Title: _____

Authorizing Signature: _____

My signature indicates that I understand that FAPSC serves only as a facilitator for this scholarship program and that the institution is responsible for the full, \$5,000 and/or \$1,000 scholarship(s) offered. These scholarships are provided by my institution and are handled the same as any institutional scholarship we offer. FAPSC is responsible for facilitating the program, developing and mailing marketing materials and selecting scholarship recipients.

SCHOLARSHIP CONTACT:

Name will appear as the institution's primary contact on all scholarship information.

Name: _____ Title: _____

E-mail: _____ Phone: _____ Fax: _____

YES! SIGN US UP in the scholarship program! \$500 per campus x _____ Total: \$ _____

PAYMENT METHOD: Check/Money Order Enclosed (payable to FAPSC) **TOTAL AMT. AUTH. \$ _____**

Bill me in August 2010! or Charge My: Visa Mastercard American Express **Note: By using Visa, Mastercard or check you could help save FAPSC \$10,000 per year in AmEx fees.**

Cardholder's Name: _____

Card # _____ Code: _____ Exp. Date: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Signature: _____

• More on other side •

Scholarship Offerings Form

Please print clearly or type. If additional forms are necessary, please photocopy or visit our website www.FAPSC.org.

Please note: A full tuition scholarship must include all books, fees and supplies that are customarily included in the tuition for that program. Any additional books, fees, and supplies shall be the responsibility of the student and must be disclosed on this form.

Program Title: _____

Program Length: Class Hours: _____ Credit Hours: _____ Type of Degree: _____

Tuition: \$ _____ Books, Fees, & Supplies: \$ _____

Enrollment: Summer Enrollment Fall Enrollment or Either

Full Scholarship including book, fees and supplies _____ # scholarships offered

Full Scholarship not including book, fees and supplies _____ # scholarships offered

\$5,000 _____ # scholarships offered \$1,000 _____ # scholarships offered

Program Title: _____

Program Length: Class Hours: _____ Credit Hours: _____ Type of Degree: _____

Tuition: \$ _____ Books, Fees, & Supplies: \$ _____

Enrollment: Summer Enrollment Fall Enrollment or Either

Full Scholarship including book, fees and supplies _____ # scholarships offered

Full Scholarship not including book, fees and supplies _____ # scholarships offered

\$5,000 _____ # scholarships offered \$1,000 _____ # scholarships offered

Program Title: _____

Program Length: Class Hours: _____ Credit Hours: _____ Type of Degree: _____

Tuition: \$ _____ Books, Fees, & Supplies: \$ _____

Enrollment: Summer Enrollment Fall Enrollment or Either

Full Scholarship including book, fees and supplies _____ # scholarships offered

Full Scholarship not including book, fees and supplies _____ # scholarships offered

\$5,000 _____ # scholarships offered \$1,000 _____ # scholarships offered

Program Title: _____

Program Length: Class Hours: _____ Credit Hours: _____ Type of Degree: _____

Tuition: \$ _____ Books, Fees, & Supplies: \$ _____

Enrollment: Summer Enrollment Fall Enrollment or Either

Full Scholarship including book, fees and supplies _____ # scholarships offered

Full Scholarship not including book, fees and supplies _____ # scholarships offered

\$5,000 _____ # scholarships offered \$1,000 _____ # scholarships offered



Return completed form to FAPSC 150 South Monroe Street, Suite 303, Tallahassee, FL 32301

Phone: 850.577.3139 • Fax: 850.577.3133