

# BCF Scholarship Awardee Information Form



Name of Scholarship

  
  
  

Scholarship Amount

  
  
  

Scholarship Recipient's Name

Recipient GPA

Anticipated Graduation Date

## Brief Bio of Scholarship Recipient

Please share a short biography highlighting your academic journey, goals, and how this scholarship impacts you.

## Scholarship Recipient Quote

Please share a meaningful quote in your own words reflecting what this scholarship means to you.

## Consent and Release

By signing below, I grant the Barstow College Foundation (BCF) permission to use and share my name, story, quote, and photograph (if provided) for Foundation-related purposes. This may include, but is not limited to, BCF social media platforms, the BCF website, scholarship donors, prospective donors, promotional materials, and future fundraising or recognition efforts. I understand that no compensation will be provided and that my participation is voluntary.

**Acknowledgement:** I have read and agree to the Consent and Release above.

Please send to [bcf@barstow.edu](mailto:bcf@barstow.edu)