

PART III: AUTHORIZATION TO RELEASE INFORMATION and CERTIFICATION

I authorize all personnel of my high school to provide information the Fund may request concerning my status as a student, such as whether I am a full-time student, number of course hours I am taking, date of expected graduation, my current mailing address, the grades I have achieved, and any other pertinent information requested.

I hereby certify that all information provided in this application is correct and complete to the best of my knowledge and belief and that all essays submitted with this application were prepared and written solely by me.

I also understand that it is solely my responsibility to submit by the stated deadlines, all components of the application, including all supporting reports and documentation. I further understand that solely I am responsible for the timely submission of the three letters of recommendation, the school counselor report and my transcript, even though those items are sent by my recommenders and school counselor.

Furthermore, I understand that if I am granted an interview by either the District Committee on March 26, 2017 and/or the Finalist Committee on April 23, 2017, I will be disqualified from consideration for a scholarship if I am unable to attend my scheduled interview.

Electronic Signature of Applicant _____ Date: _____