



Your Bulldog Connection. For Life.

Chapter Joint Funded Scholarship Program Participation Form

Chapter Name: _____ Date: _____

Requested Amount to be Matched: _____ \$ (maximum \$500.00)

The above chapter authorizes the FSAA to transfer the above amount to the FSAA Scholarship Fund upon approval by the Alliances Committee.

Authorized Signer: _____

Authorized Signer: _____

Form must be submitted by June 30th of each year, along with scholarship selections, and California State University, Fresno Scholarship Applications.

For Official Use Only

- Chapter is in good standing with FSAA. (signed/date _____)
- Chapter complies with the Chapter Maintenance Requirements. (signed/date _____)
- Has on deposit in its FSAA account an amount equal to the amount requested. (signed/date _____)
- Approval by Alliances Committee (signed/date _____)
- Transfer of Funds from said chapter to FSAA Scholarship Fund (signed/date _____)
- Chapter President Notified (signed/date _____)

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