

THE POWER OF
DOING

The Campaign for
Learn by Doing



CAL POLY SCHOLARSHIP OFFICE

Contact Us

San Luis Obispo, CA
93407-0444

805-756-7466
scholarship-gifts@calpoly.edu
giving.calpoly.edu/scholarships

IT'S YOUR LEGACY. EXPLORE IT.

SCHOLARSHIP INQUIRY FORM

DONOR CONTACT INFORMATION

NAME

TITLE

BUSINESS

ADDRESS

PHONE (HOME/CELL) (BUSINESS)

EMAIL

STUDENT ELIGIBILITY REQUIREMENTS

COLLEGE OR MAJOR

MINIMUM GPA

CLASS LEVEL

FINANCIAL NEED (CHECK ONE) YES NO NO PREFERENCE

ANNUAL OR ENDOWED SCHOLARSHIP

If annual, number of scholarships per school year and the amount (minimum five year commitment of \$1,000)

_____ @ \$ _____

If endowed, amount of gift (minimum \$25,000)

What would you like the name of your scholarship to be?

Who will be the contact and designated signer for the agreement?

OTHER INFORMATION

What is the purpose for establishing this scholarship?

Thank you for your interest in establishing a scholarship at Cal Poly. If you have any questions or would like additional information, please do not hesitate to contact us. Please email or fax the completed form to the Scholarship Office.