

# Scholarship Recipient Claim Form

**Please submit this form, with a copy of your tuition bill, no later than December 31, 2010. Awards not claimed by this date will be forfeited. There will be no exceptions to the deadline.**

Student \_\_\_\_\_

Home Address \_\_\_\_\_

Home Telephone \_\_\_\_\_

Amount Requested \_\_\_\_\_

Checks will be made payable to the college only, with the student's name on the memo line. Checks will be mailed to the student's home address. It will be the student's responsibility to forward the check to the college. You must notify the committee **in writing** if you choose **not** to attend college during the 2010/2011 academic year.

**CHECKS MUST BE CASHED WITHIN 6 MONTHS OF ISSUE. SUBSTITUTE CHECKS WILL NOT BE ISSUED.**

Mail this form to: Joseph Case High School Trustees  
P. O. Box 33  
Swansea, MA 02777  
Please allow 10 days for processing.  
**Be sure to include a copy of your tuition bill.**