**M E M O R A N D U M**

**DATE:** July 14, 2007

**TO:** All Chapter Scholarship Recipients

**FROM: To’Nanees’Dizi Chapter**

**SUBJECT:** Understanding of Obligation of the To’Nanees’Dizi Chapter Scholarship Policies and Procedures

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have read and understood the Chapter Scholarship Policies and Procedures.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ understand that upon my award of the Chapter Scholarship, I am obligated to utilize the funds for my educational expenses as specified in the Chapter Scholarship Policies and Procedures. I also understand that as specified in the Chapter Scholarship Policies and Procedures that I will be obligated to repay the awarded funds if I misuse the funds or if I withdraw from school unofficially and without notification to the To’Nanees’Dizi Chapter.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PERMISSION FORM:**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print name clearly) give permission to the To’Nanees’Dizi Chapter to verify with, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (school name) on my behalf to ensure my attendance and proper academic status to continue my scholarship assistance from the Chapter. I understand this maybe a random check on my behalf to the school.

Signature/Parent (minor):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_