BARRY GOLDWATER SCHOLARSHIP PROGRAM

AWARD REPLY FORM

\square Mr. \boxtimes Ms.
Name lasmine Brewer
Home Address 403 Sweetgrass Ave.
City/State/ZIP Code Bozeman, MT 59718
Home Telephone (406) 582 - 8118 Social Security Number 542 - 41 - 7196
College/University you will attend in the 2014-2015 academic year university of Colorado at Boulder
Institution's City/State/ZIP Code Boulder CO 80309
Expected graduation date (month and year) May 2015 E-mail jasmine. brewere colorado, edu
I hereby accept the Goldwater Scholarship awarded me and certify that I have read and agree to the Statement of Terms and Conditions and Program Regulations.
I understand that the scholarship covers eligible expenses in the following four categories:
 tuition required fees books (a maximum annual allowance of \$800) room and board (an allowance based on the average amount paid by students at my institution for the type of housing in which I live)
The maximum annual grant is \$7,500 or the sum of the above, whichever is less. No other educational costs are covered. Funding will begin with the fall term of the 2014-2015 academic year.
In using this award during the term of the scholarship period, I agree to abide by all the requirements in the Statement of Terms and Conditions which is enclosed herewith, and a part of, the award letter.
Signature Jahnin Benn Date 4-12-2014

Please complete and return this form, postmarked no later than May 29, 2014 to:

Barry Goldwater Scholarship and Excellence in Education Foundation 6225 Brandon Avenue, Suite 315 Springfield, VA 22150-2519