

WORTHY STUDENT DONOR'S ALLOCATION REQUEST FORM

Upon making a contribution to *Great Lakes Adventist Academy* for financial aid to students, it is my understanding that this money will be placed in the Worthy Student Fund and distributed according to the criteria established by the Worthy Student Committee.

If I have expressed a desire that a particular student receive financial aid, I understand that such student will be considered by the committee, but that financial aid will be granted to such student only if he/she meets the requirement established for receiving financial aid.

I certify that I am not the parent, guardian or guarantor of such student and that this contribution is not a transfer of funds from the parent, guardian or guarantee thereof.

I would like my donation of \$ _____ to benefit worthy students of *Great Lakes Adventist Academy* with primary consideration being given to:

Student's Name: _____

I have read the above statement and understand it.

(Signature)

(Date)

Great Lakes Adventist Academy
Attn: Worthy Student Committee
P.O. Box 68,
Cedar Lake, MI 48812
Phone: (989) 427-5181 • Fax: (989) 427-5027
- donate online at glaa.net -