

2021 CALIFORNIA HIGH SCHOOL RODEO SCHOLARSHIP

District Scholarship Claim Form

RETURN THIS FORM TO:

California High School Rodeo Association
Attention: Tisha Gozzelino
P O Box 842
Soledad, CA 93960

Award Scholarship Amount: _____

Award Scholarship Amount: _____

Awarded by: District 4 Scholarship Program

Awarded by: Nucci Family Memorial
Scholarship

Awarded by: Blaire Strohn Scholarship

Payment will be made directly payable to the school.

1. _____
Recipient's Name

Phone Number: _____

Social Security Number / Student ID Number: _____

Address

City, State Zip Code

AND

2. _____
Name / School Representative

Phone Number: _____

Title of Representative

*Please include Proof of Enrollment --- Copy of
course registration, Final grades, or other Proof of
Enrollment

School Name

Please verify that all student fees are paid
prior to endorsing your part of the check.

Last day of withdrawal without financial penalty

NO CHECKS WILL BE ISSUED UNTIL THIS DATE HAS PASSED

Please contact Marietta Carlin @ 831-512-8787 or princessmce@comcast.net if
you have any questions.