

## North Carolina Independent Colleges and Universities Named Scholarship Recipient Questionnaire

In addition to raising scholarship monies to help ensure students across the state have continued access to independent higher education, North Carolina Independent Colleges and Universities also represents the 36 independent colleges and universities and their students in the areas of state and federal public policy and on educational issues with other sectors in the state.

Oftentimes, our best spokespersons for continued financial and policy support of independent higher education are the students who are empowered to attend our colleges and universities because of financial assistance they receive through our programs and scholarships. For that reason, **we ask that you take a few minutes to share your personal story regarding your efforts to attend college.** We will use your compelling remarks in future efforts to represent the need for ensuring students' access to independent higher education.

Student Name \_\_\_\_\_

College or University Name \_\_\_\_\_

Class Year:    Freshman    Sophomore    Junior    Senior    Graduate Student

Major \_\_\_\_\_

E-mail address \_\_\_\_\_  
*(Please provide the e-mail address you check regularly!)*

Extracurricular Activities \_\_\_\_\_  
\_\_\_\_\_

I am the recipient of the following named scholarship(s):  
*(Please mark all that apply.)*

Blue Cross Blue Shield of North Carolina  
Scholarship

ICFNC Advisory Board Scholarship

Bridgestone Scholarship

North Carolina Sheriffs' Association  
Criminal Justice Scholarship

Broyhill Family Foundation Scholarship

Thomas & Ashley Varnadore Scholarship of  
Optimism in Future Generations

CIC/UPS Foundation Scholarship

Clancy & Theys Scholarship

Dominion NC Power

First Generation Scholarship

Jeff and Jan Stoddard Scholarship for Hope

**Please answer the following questions in narrative form (1-3 sentences):**

What factors influenced your decision to attend your chosen college or university?  
(Campus atmosphere, location, size, financial aid package, variety of majors, etc.)

If you could speak to the person, company or foundation sponsoring your scholarship, what would you want them to know regarding the scholarship's impact on your ability to attend college?

Share a little about your college experience thus far.

What do you anticipate the long-term impact of attending college will have in your life and on your professional goals?

Speak a little about why you chose a private school? What are some of the benefits?

*Photos and videos are helpful in sharing your message. If you would be willing to share a photo of yourself or if you would like us to pass along a video message to the donor, please send to Lexie Daniels at [daniels@ncicu.org](mailto:daniels@ncicu.org).*

The Independent College Fund of North Carolina in association with North Carolina Independent Colleges and Universities has permission to use information about me in future promotional materials in relation to this program. Information used will include name, photo, city, major, college or university, and quotes from the answers to the questions listed above.

Agree

Disagree

\_\_\_\_\_  
Signature of student

\_\_\_\_\_  
Date

## Student Information Release Form

The Federal Family Education Rights and Privacy Act of 1974 (FERPA) prohibits colleges and universities from providing certain information from student records to third parties. FERPA is a Federal law that protects the privacy of student education records. In general, in order for your college or university to release information protected by FERPA to anyone, other than yourself, you must approve the release. This form is a release of certain of the protections provided by FERPA and **must be signed by you (the student) to be effective (or by your parent if you are under eighteen years of age)**. This form will remain in effect until revoked by you in writing.

I \_\_\_\_\_ (student name) hereby waive my rights under the Family Education Rights and Privacy Act (FERPA) and other applicable laws to the extent described herein and give my consent and authorize \_\_\_\_\_ (insert college/university) to share educational information, personally identifiable information, and directory information to North Carolina Independent Colleges and Universities and its collaborators and funders. Information included in this consent includes but is not limited to information regarding financial aid applied for and/or received, mailing address, email address, phone number, other contact information, demographic information (such as gender, race, and age), social security number, enrollment status, major, GPA, and photos.

I understand that this authorization will remain in effect until I submit a written request to cancel this authorization.

\_\_\_\_\_  
Student's Name (Print)

\_\_\_\_\_  
Name of College/University

\_\_\_\_\_  
Student's Signature  
(Only the student can sign)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Scholarship Received

\_\_\_\_\_  
Hometown Newspaper

\_\_\_\_\_  
Name of Parents

Return to:  
NCICU  
530 N. Blount Street, Raleigh, NC  
27604 Email: [daniels@ncicu.org](mailto:daniels@ncicu.org)