



NIAF Matching Scholarship Donation Form

Name of Organization: _____

Address: _____

Contact Person: _____ Telephone: _____

Scholarship Title: _____
(Example, The Orlando Italian Society Scholarship)

Date Established: _____

Student Selection Criteria (all applicants must meet the NIAF basic application requirements to prove high academic standing). Check **two** that apply:

___ Academic Institution _____

___ State of Permanent Residence _____

___ Major/Field of Study _____

___ Italian American Heritage (specify region in Italy) _____

___ Other _____

Total Amount Pledged (minimum \$2,500) \$ _____

Person(s) to receive annual stewardship report:

Name(s): _____

Address: _____

*Please return completed form to Serena Cantoni, Director of Education:
1860 19th Street NW, Washington, D.C. 20009 or fax (202) 387-0800.*

Make checks payable to The National Italian American Foundation.

Deadline is May 31, 2010.