

Guardian Scholars Foundation Release and Consent Form

Signing this form allows the Guardian Scholars Foundation to release information and photos provided to us by you and other information gathered during official Guardian Scholars meetings. This includes, but is not limited to, information and photos from your application form, scholar profile form and follow-up emails and conversations in regard to your activities while receiving your scholarship as well as those shared with us after your graduation.

INITIALS

Completion of this form also authorizes the Guardian Scholars Foundation to access your academic information provided on both your high school and future college transcripts, as well as your financial aid and other fiscal information with the colleges.

INITIALS

Additionally, signing this form gives the Guardian Scholars Foundation permission to work with the Iowa Department of Human Services to gather the information necessary to confirm your time spent in the foster care system.

INITIALS

I, _____, voluntarily grant permission to the
(Print Name)

Guardian Scholars Foundation to release information included in the aforementioned list in the above paragraphs of this document.

This release shall remain in effect indefinitely.

(Student Signature)

(Today's Date)

(Student's Legal Guardian's signature if under the age of 18 at time of signature)

(Today's Date)

Return completed application packet (application, essay, two letters of recommendation, and consent form) by mail to the Guardian Scholars Foundation Executive Director at:

Thomas Wolff
3775 EP True Pkwy, Suite 254
West Des Moines, IA 50265

OR

Scan and email to Thomas@guardianscholarsfoundation.org

PLEASE NOTE: All information provided is for the Guardian Scholars Foundation. The Guardian Scholars Foundation awards scholarships and has no influence or involvement in the decision of the colleges and universities to accept or reject your college application.