

Scholarship Donor Form

(Please return by December 3, 2004)



50th Annual State Science and Engineering Fair of Florida
April 6-8, 2005 Orange County Convention Center, Orlando

Donor

Full Name of College or University: (**NOTE:** This is how it will be listed in the program book.)

Donor Contact

Name: _____

Title: _____

College/University: _____

Mailing Address: _____, FL _____
Number and Street City Zip+4

Work Phone: _____ Home Phone: _____

Fax Number: _____ E-mail Address: _____

Description and Location of Award

Please describe the award(s) below and state the location (city) of the college or university.

Judging Criteria

Please describe what criteria are to be used when judging the scholarship. If you are giving more than one, please include adequate information about each one. You may wish to limit the award(s) to a single category or subject.

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