

# Donald Lee Bonnewell Scholarship Application

## College Stores Association of North Carolina

Please carefully review guidelines before completing and mailing this application. All sections must be completed for consideration.

Name \_\_\_\_\_ Title \_\_\_\_\_

Bookstore Name \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

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### SECTION 1

Name of individual for whom scholarship is intended

\_\_\_\_\_

Relationship to member

\_\_\_\_\_

Name of College or University

\_\_\_\_\_

Date classes to be attended begin

\_\_\_\_\_

### SECTION 2

1. Have you paid member dues for both past and current year?

Yes  No

2. Have you been awarded a Bonnewell Scholarship within the past 24 months?

Yes  No

**SECTION 3**

**TO THE COLLEGE STORES ASSOCIATION OF NORTH CAROLINA  
SCHOLARSHIP COMMITTEE:**

I am requesting a scholarship in order to assist with the educational costs for one of my dependents who will be attending a college or university this fall .

Signed \_\_\_\_\_

Title \_\_\_\_\_

Date of application: \_\_\_\_\_

Additional factors for consideration by the scholarship committee \_\_\_\_\_

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Please send completed scholarship applications to the Chairman of the Scholarship Committee.

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