



# HARDING

UNIVERSITY

## Center for Charitable Estate Planning

Ken Bissell, Director  
(501) 279-4210  
endowment@harding.edu

### Endowed Scholarship Request Form

If you are interested in establishing an endowed scholarship, please fill out this form and email to endowment@harding.edu, or print, complete and mail to Center for Charitable Estate Planning, Harding University, P. O. Box 12283, Searcy, AR 72149. A member of the CCEP staff will contact you to complete the process. Thank you!  
\*Denotes required information

\_\_\_\_\_  
\*Name of Person(s) Creating Scholarship

\_\_\_\_\_  
\*Address City/State Zip

\_\_\_\_\_  
\*Phone \*Email

\_\_\_\_\_  
\*Proposed Scholarship Name

In honor of  In memory of \_\_\_\_\_

**\*Purpose** – Provide a short paragraph describing why scholarship is being established. This could include biographical information on person(s) for whom the scholarship is named:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*Preferences** – Creator can specify scholarship recipient(s) by college/department/major or other criteria. If no preference, please indicate by checking this box.

College:  Allied Health  Business Administration  Pharmacy  
 Arts & Humanities  Education  Sciences  
 Bible & Ministry  Nursing  Honors

Academic Department \_\_\_\_\_ Major \_\_\_\_\_

Other Criteria (please specify) \_\_\_\_\_

**\*Funding** (check appropriate boxes): Scholarship funded through  current donations  estate gifts  both

Annual scholarship disbursement is 4.5% of scholarship fund's principal. Scholarship disbursements shall not be issued until total contributions to the scholarship fund or value of fund equals or exceeds \$25,000. In the event the above criteria are not met within five years of the date of the initial contribution, Harding has the discretion to terminate the restrictions of this agreement and add the fund to the University's general endowment.

\_\_\_\_\_  
Signature, Scholarship Creator Signature, Scholarship Creator Date