



SAMUEL STATEN, SR.
CHARITABLE TRUST

ORGANIZED LABOR... MAKING A DIFFERENCE IN OUR COMMUNITY

Qaid Staten Memorial Scholarship Fund
Spring Cycle - Mid-Semester Grade Verification Form

Student Name: _____ Student ID#: _____

School/University: _____

Dear Professors: The student mentioned above has applied for the Spring Cycle of our Qaid Staten Memorial Scholarship Fund, which is based on merit and financial need. Please complete the information below to help us verify the student's status, as fall semester grades will not be available by our decision deadline. Thank you for your assistance! For questions, you can reach me at QaidScholarship@gmail.com or 267-757-0726. To learn more about the fund, visit www.statencharitabletrust.org.

Best,
Dana Brady, Executive Director and Scholarship Administrator

<u>Course Name and Number</u>	<u>Current Grade (Letter or %)</u>	<u>Comments</u>	<u>Professor Name and Signature/E-Signature</u>	<u>Professor's School Email Address and Phone Number</u>

When completed, fax, email or mail this form to:
Dana Brady, Executive Director and Scholarship Administrator
Qaid Staten Memorial Scholarship Fund
Fax: 267-757-0725
506 Corporate Drive West, Langhorne, PA 19047
QaidScholarship@gmail.com