



Ohio PTA
SCHOLARSHIP CONTRIBUTION
FORM

2025-27

Please return this form along with your Unit/Council scholarship check to the Ohio PTA by March 1st. If your Unit participates in a Council Scholarship program – please send your check directly to the Council treasurer or designated person.

Name of PTA Unit or Council: _____

County _____ PTA District # _____

Scholarship Chairperson: _____

Email address: _____

Home Address _____ City: _____

Zip Code: _____ Telephone number: _____

Our Unit/Council is submitting \$_____. Our check is made payable to the Ohio PTA.

The monies should be allocated as follows:

___ (\$500) Academic Scholarship for students from _____ High.

___ (\$500) Post- Secondary/Associate Scholarship for students from _____ High.

___ (\$500) Special Education Scholarship for Students from _____ High.

Additional Instructions: _____

If instructions require a student to have attended a designated elementary or middle school and no applicant is available, can the committee choose another applicant from the designated high school? _____yes _____no

We cannot afford a full scholarship but would like to contribute to the General Scholarship Fund. We are enclosing a check made payable to the Ohio PTA for \$_____.

REMEMBER:

- Academic Scholarship - \$500
- Post-Secondary/Associate Degree Scholarship - \$500
- Special Education Scholarship - \$500
- Contributions must accompany this form and be submitted to the

Ohio PTA, 40 Northwoods Blvd. Ste. A, Columbus, OH 43235 postmarked by **March 1st**.

OPTA Memorial Scholarship Contribution form is now available on-line at

<https://ohpta.givebacks.com/shop?category=30881>