



Release Form for DAYCO Scholarship
(Must be submitted with DAYCO Scholarship Application)

I. Student Information (Please Print):

Name: _____ Social Security Number: _____

Mailing Address:

Street City State Zip code

Phone Number: (_____) _____ E-mail: _____

Institution currently enrolled: _____

II. Student Signature:

I understand that in order to be awarded the DAYCO Scholarship I must complete and file the Free Application for Federal Student Aid (FAFSA) form. I hereby authorize _____, where I am
(Institution Name)
enrolled as a student, to release any and all information provided on my FAFSA form to the S.C. Commission on Higher Education. I also certify that all information provided on my FAFSA form is true and accurate. Additionally, should I be selected as a DAYCO Scholarship Recipient, I release permission to DAYCO Products, Inc. and to the S.C. Commission on Higher Education in any announcement regarding the scholarship.

Student Signature (required)

Date

Please submit completed form along with a DAYCO Scholarship Application to:
South Carolina Commission on Higher Education
Attn: DAYCO Scholarship
1122 Lady Street, Suite 300
Columbia, SC 29201