



Greater Lynchburg Community Foundation

1100 Commerce Street, Lynchburg, VA 24504 · (434) 845-6500 · Fax (434) 845-6530
www.lynchburgfoundation.org

Scholarship name: _____

SELECTION COMMITTEE MEMBER QUESTIONNAIRE

Academic Year: _____

Name of the Selection Committee Prospective Member: _____

Address: _____

Phone Number: _____

Employment: _____

Qualifications Related to Selection Committee Membership (e.g. area of expertise, school principal, etc.):

Relationship to the Donor (e.g. relative, employer, donor's attorney):

Any Comments: _____

For Donor and Selection Committee Use Only:

Who has recommended this prospective member: _____

Explain any relationship to the donor (relative, employee, attorney, etc.): _____

Selected: Yes / No

If Yes:

Why selected: _____

Forward to Greater Lynchburg Community Foundation

For Greater Lynchburg Community Foundation Use Only:

Appointed: Yes/ No

Retain a Copy and Return to the Current Selection Committee or its Chairman