



Payroll Deduction Authorization

La Raza Employees Association Scholarship

Several Scholarships in varying amounts will be awarded to deserving Latina/o Delta College Students. Your support is crucial in helping students continue their College education.

Scholarship Requirements:

Latina/o student completing at least 12 units with a letter grade. Must maintain full-time status, continuing or transferring student, minimum 2.5 GPA

Donor Information (please print or type):

<i>Name</i>	_____
<i>Delta ID#</i>	_____
<i>Cell Phone#</i>	_____
<i>Work Number#</i>	_____
<i>E-mail</i>	_____

You are hereby authorized to:

Begin Discontinue Change

Deductions from my salary for payments TO:

LA RAZA EMPLOYEES ASSOCIATION SCHOLARSHIP

ACCOUNT # **8300.30041.2002.696000.10184.30001.8822.0000.0000**

In the monthly amount of: ____ \$25 ____ \$50 ____ \$100 ____ Other \$ ____.

Acknowledgement:

Employee Signature: _____ Date _____

For more information, please contact Treasurer, Eva Martinez 209-954-5151 ext. 5209