



MAPLETON
Education Foundation

P: (303) 853-1033
8980 York Street
Thornton, CO 80229

Scholarship Deferral Form

Student Information (ALL APPLICATION COMPONENTS MUST BE TYPED)

All fields marked with * are mandatory.

First Name*: _____ Last Name*: _____

Address* (Street Address, City, State, ZIP): _____

Phone #*: _____ Email*: _____

Which Mapleton school did you graduate from?*: _____ Year of Graduation*: _____

Have you been admitted to a postsecondary institution?*: YES NO

Name of postsecondary institution (if applicable)*: _____

Please briefly describe why you are applying for a scholarship deferral*: _____

Deferrals are considered on a case by case basis. You will be notified about the status of your deferral request within six weeks of submitting this form. Forms are due no later than one year after your scholarship has been awarded (no later than May 30th).

Applicant Signature

Printed Name

Date