

RSPA SCHOLARSHIP AFFIDAVIT OF MEMBER COMPANY

(Please Note: Form must be completed by company owner/principal or executive)

I, _	, of legal age, being duly sworn according to law upon my oath, classes and say:
	have an ownership interest in or am in a leadership position with
2.	an employee an employee's child my grandchild
3. 1	The employee, is currently employed and has been since (Employee Name) (Month/Year)
4.	I am submitting this Affidavit in connection with
	ned:
Titl	e: Date: