

**2015 L. Austin Weeks Undergraduate Grant Program
Intended Use Receipt (STUDENT ORGANIZATION)**



Name (please print): _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Country: _____ Grant Amount Awarded: _____



I agree that I will utilize the grant given to me by the AAPG Foundation for the sole purpose of furthering geologic education and is based on the reasons provided in my 2015 L. Austin Weeks Undergraduate Grant application.

Signature: _____ Date: _____

Please sign and return this form to AAPG Foundation Program Coordinator, April Stuart, by email:
astuart@aapg.org, fax: 918.560.2642, or mail: PO Box 979 Tulsa, OK 74101.