

## STUDENT CERTIFICATION

To: David S. Ishii Foundation  
Dayton Asato – College Scholarship Committee

I am the \_\_\_\_\_ of  
(Position of person making the certification)

\_\_\_\_\_. I certify that  
(Name of the school)

\_\_\_\_\_ is registered as a full-time  
(Name of student-awardee)

student at our school located in \_\_\_\_\_  
(City and State)

for the school year \_\_\_\_\_.

\_\_\_\_\_ Date: \_\_\_\_\_  
(Signature of person certifying)

\_\_\_\_\_  
(Print name of the signatory)

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I understand and agree that a check in the amount of \$1,000.00 will be made payable to both the school and me and will be issued upon the Foundation's receipt of this Certification. I further understand that this student certification must be submitted annually. I will notify you immediately if I am no longer a full-time student, if I do not maintain a grade point average of 2.0 for each quarter or semester, or if I am otherwise no longer eligible for the scholarship.

\_\_\_\_\_ Date: \_\_\_\_\_  
(Signature of the student-awardee)

Mailing address: \_\_\_\_\_  
\_\_\_\_\_

Please complete, sign and mail no later than September 30<sup>th</sup> of the applicable school year to: David S. Ishii Foundation

P.O. Box 2927

Aiea, Hawaii 96701

Or email: [info@davidshiifoundation.org](mailto:info@davidshiifoundation.org) and mail the original.

A copy of this Certification will also be available online.