



Scholarship Notice Form

Please provide all information requested below in order to assure that the student's account be credited in a timely manner, then forward this form either by email to scholarships@umsl.edu or send award form to the **Office of Student Financial Services, 327 Millennium Student Center**. Any questions regarding completion of this form may be directed to **Kaje Sanford** at **x4902**. Please be sure to fill out both pages with as much information as possible.

Student Information

(If multiple students should receive the same award, please list them and their information on page 3.)

Student Name: _____

UMSL Student ID: _____

College, School, or Department Information

Undergraduate students will be expected to be full-time (minimum 12 hours) unless otherwise noted below or as indicated in the scholarship endowment or annual agreement. All recipients of endowed/annual scholarships must meet the criteria set forth in the endowment/annual scholarship agreement. Indicate the amount of the scholarship for the semester(s) in which the scholarship should be received.

Name of College, School, or Department: _____

Name of Scholarship: _____

PeopleSoft Chartfields

MoCode: _____ Business Unit: _____ Fund: _____ DeptID: _____

Program: _____ Project: _____ Class: _____

The budget line for Student Aid (7600XX) must be set up in PeopleSoft Financials before this award can be made. Has that been completed? _____

Award Amounts

<u>Semester</u>	<u>Amount</u>	<u>Total Amount for the Year</u>
Fall 20_____	\$ _____	
Spring 20_____	\$ _____	\$ _____
Summer 20_____	\$ _____	

Authorizing Name/Signature

Date

Contact Name (if different from Authorization)

Phone

Scholarship Requests are for internal use only and should not be provided to students.



Scholarship Notice Form Part 2

Please provide all information requested below in order to assure that the student's account be credited in a timely manner, then forward this form either by email to scholarships@umsl.edu or send award form to the **Office of Student Financial Services, 327 Millennium Student Center**. Any questions regarding completion of this form may be directed to **Kaje Sanford** at **x4902**. Please be sure to fill out both pages with as much information as possible.

Scholarship Information

Undergraduate and Graduate students will be expected to be full-time (undergraduate minimum 12 hours & graduate minimum 9 hours), unless otherwise noted below or as indicated in the scholarship endowment or annual agreement. All recipients of endowed/annual scholarships must meet the criteria set forth in the endowment/annual scholarship agreement. Please fill out the information below.

How many credit hours are students required to be in to receive this scholarship? _____
(i.e. 12 credits, 9 credits, 6 credits, etc...)

Is there a GPA minimum requirement for this scholarship? If so, please list it here. _____

Please check the box next to what this scholarship is meant to cover.

Tuition and/or Fees Non-Resident Fees Room&Board Bookstore Charges

Is this scholarship refundable? Yes No
(i.e. if a student's balance is covered, should extra funds be returned to the department or refunded to the student)

Is this scholarship for a summer semester? Yes No
If not, will it possibly be used for a summer semester in the future? Yes No

Please describe any special notes regarding this scholarship if there are any.

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Please list additional students that should receive the same award if any.

Name

ID Number

Fall Amount

Spring Amount

Total Amount