| myUTSA ID: Student's First Name: Last: | | | | |
|---|-------------|-----------------------|-----|-----|
| IIIVUISAID: Student S FIIST Name: Last: | mulited in. | Ctudont's First Name. | l a | ct. |
| | IIVUISAID: | Student's riist Name: | Ld | St: |



2024-2025 Outside Scholarship Notification Form

Directions: If you are expecting an outside scholarship, please complete this form and return it to our office so that any applicable changes can be made to your financial aid package in anticipation of these funds. A placeholder will be added to your award for the amount and terms indicated on this form. The placeholder will be adjusted or canceled once we receive the scholarship check.

Outside Scholarship Donation Station: To expedite the submission and awarding of your outside scholarship, our office has created an online donation portal for outside scholarship donors. Our Outside Scholarship Donation Station will help your donor submit your scholarship within 2-3 business days through electronic check payment instead of mailing a paper check. Recommend your donor visit our Outside Scholarships website to review the steps on submitting your scholarship.

How to Submit Form: Submit via the Document Uploader.

• <u>Fields to select on the Document Uploader:</u> Department: Financial Aid & Scholarships; Term: 2024-2025; Category: Scholarship and Resource Form; Category 2: External Scholarships; Document: External Scholarship Form

| STEP 1: OUTSIDE SCHOLARSHIP INFO """""""""""""""""""""""""""""""""""" |
|--|
| Complete the outside scholarship information (up to three scholarships can be listed on this form). Please indicate the total amount and for which semesters you |

| will be receiving the scholarship(s the donor. |). We will attempt to process the schola | rship(s) for the semesters that you request below, unless otherwise specified by |
|---|--|--|
| Scholarship Name: | | |
| Contact Name for Donor: | | |
| Contact Phone/Email: | | |
| Donor Address (Street, City, State, | Zip): | |
| Semester(s) to Receive Award | Award Amount | |
| Fall | \$ | |

| Semester (s) to necester in ara | 7117ara 71117bant |
|---------------------------------|-------------------|
| Fall | \$ |
| Spring | \$ |
| Summer | \$ |
| Total expected award | \$ |

| Contact Name for Donor: _ | | |
|---------------------------|--|--|
| Contact Phone/Email: | | |

Donor Address (Street, City, State, Zip):

| Semester(s) to Receive Award | Award Amount |
|------------------------------|--------------|
| Fall | \$ |
| Spring | \$ |
| Summer | \$ |
| Total expected award | \$ |
| | |

Continue on Page 2

| 0.07.0 | USE ONLY | • |
|--------|-----------------|---|

Date: _

Scholarship Name: ___

Received By:

Processed By: _____

Page 1 of 2

| myUTSA ID: | Student's First Name: | Last: | 2024-2025 Outside Scholarship Notification Form · Page 2 |
|--|--|--|---|
| Scholarship Name: | | | |
| Contact Name for Donor: | | | |
| Contact Phone/Email: | | | |
| Donor Address (Street, City, St | ate, Zip): | | |
| Semester(s) to Receive Award | Award Amount | | |
| Fall | \$ | | |
| Spring | \$ | | |
| Summer | \$ | | |
| Total expected award | \$ | | |
| The information submitted f I understand that my finance | signature on this document confirms your of for review is true and correct to the best of m ial aid awards may be adjusted to account f may be a 5-7 business day processing time | y knowledge. or the scholarships and/or resources listed | above. |
| Student Signature: | | Phone or Email: | Date: |
| are entitled to receive and review this incorrect, in accordance with the proce | | ment Code, you are entitled to have U.T. San Antonio co ss Procedures Memorandum 32. The information that U | orrect information about you that is held by us and that is J.T. San Antonio collects will be retained and maintained as |
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| | | SA OFFICE USE ONLY: | |
| | | | RRAAREQ Code: OSC |

RRAAREQ Code: OSCH WebX Code: FA_SCH_OSCH Form revised 3/4/24

Date: _____ Received By: _____ Processed By: _____