



STUDENT-ATHLETE OUTSIDE AID FORM

ATHLETICS COMPLIANCE

TO BE COMPLETED BY THE STUDENT-ATHLETE

NAME OF STUDENT-ATHLETE _____

SPORT _____

OUTSIDE FINANCIAL AID INFORMATION

NAME OF AWARD _____

NAME OF AWARING AGENCY (e.g., high school, YMCA, etc.) _____

CONTACT PERSON NAME _____

CONTACT EMAIL / PHONE NUMBER / WEBSITE _____

\$ _____

AMOUNT OF AWARD

DURATION OF AWARD (e.g., one year, four years, etc.) _____

HOW WILL THE AWARD BE DISBURSED? _____
(e.g., check sent to UWM, check sent to you)

PLEASE PROVIDE A BLANK COPY OF THE SCHOLARSHIP APPLICATION ALONG WITH THIS FORM

PLEASE SUBMIT THE COMPLETED FORM TO JILL JURENA IN KLOTSCH PAVILION 188 OR VIA EMAIL AT JJ@UWM.EDU

PLEASE ANSWER THE FOLLOWING QUESTIONS REGARDING YOUR SCHOLARSHIP:

Yes/No *Was your choice of institutions restricted by the awarding agency (e.g., must attend a UW school)?*

Yes/No *Is there any connection between the awarding agency and UW-Milwaukee (e.g., UWM booster club)?*

Yes/No *Does the awarding agency sponsor a sports team for which you competed?*

If you answered yes to any of the above questions, please provide additional information:

All outside scholarship checks should be sent to the UW-Milwaukee Cashiers Office. If you received a check from the scholarship fund directly, please submit it to the UW-Milwaukee Cashiers Office. You can do that either in-person at Mitchell Hall, Room 285 or via mail (UW-Milwaukee, Cashier's Office, PO Box 500, Milwaukee WI 53201).

SIGNATURE OF STUDENT-ATHLETE

SIGNATURE OF STUDENT-ATHLETE _____

DATE _____

Athletic Compliance Office Use Only

Name:

Signature: