

Portland State University Foundation Scholarship Award Notification

College: _____ Department: _____ Curriculum: _____

Contact Person: _____ Phone: _____ Date: _____

Part I

New [Check if this is a new scholarship. Fill out Part II, Part III & Part V]

Change or Reissue [Check if reissuing an existing award or if amount has changed. Fill out Part II, Part IV & Part V]

Part II Scholarship Award

Scholarship Name: _____

Foundation Account Name: _____

Account #: _____

Scholarship Recipient Name: _____ PSU Student ID #: _____

Enrollment: Full Time Part Time (check one) Classification: Graduate Undergraduate (check one)

Notes: _____

Part III New Scholarship

Per Term Award (please enter "0" in terms with no award):

Fall _____ \$ _____ Winter _____ \$ _____ Spring _____ \$ _____ Summer _____ \$ _____

Notes: _____

Part IV Award Amount Change

Previous Award Amounts:

Fall _____ \$ _____ Winter _____ \$ _____ Spring _____ \$ _____ Summer _____ \$ _____

New Award Amounts:

Fall _____ \$ _____ Winter _____ \$ _____ Spring _____ \$ _____ Summer _____ \$ _____

Reason for change: _____

Part V Approval

Authorized Account Signer:

Signature: _____ Date: _____

Name printed: _____

Foundation Use Only:

PSU Foundation:

Signature: _____ Date: _____

Name printed: _____

Signer(s) Authorized : _____ Balance: _____ Date: _____