EXTERNAL SCHOLARSHIP CHECK PAGE

(check must be submitted with form)

NU ID#___________________________________________ DATE____________________

NAME__________________________________________________________

SCHOLARSHIP NAME________________________________ CHECK AMOUNT $__________

Please credit this scholarship check to the following term(s) (check one):

☐ FALL/SPRING       ☐ FALL       ☐ SPRING       ☐ SUMMER

If this check is for the fall semester, will another arrive for the spring semester? YES___ NO___

**Please be advised that your financial aid package may be revised based on the amount of need based aid being received.**

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SECTION TWO

*** To be completed by the Office of Scholarships and Financial Aid***

☐ Check requires endorsement. Please complete the following:

_____/_____/_______ Date email sent to student

_____/_____/_______ Date student endorsed check

☐ Tuition       ☐ Fees       ☐ Books       ☐ On Campus Housing       ☐ Educational Expenses

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