EXTERNAL SCHOLARSHIP/RESOURCE CHECK PAGE

(check must be submitted with form)

NU ID#___________________________________________ DATE________________

NAME______________________________________________

SCHOLARSHIP/RESOURCE NAME_________________________ CHECK AMOUNT $_____

Please credit this scholarship/resource 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.

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