

MILLIKIN UNIVERSITY.

Student Financial Services

1184 West Main Street Decatur, Illinois 62522

> 3 217.424.6317 217.424.5070 www.millikin.edu

Outside Scholarship Form

Please use this form to let us know about any outside scholarships you will be receiving. If you are attaching a scholarship check to this form, and the check is made payable to you, or to you and Millikin, please endorse the back of the check.

First Name	Last Name	Millikin ID#
Date of Check	Today's Date	
Name of Donor		
Outside Scholarship Name (if different from Donor Name)		
Total Scholarship Award Amount \$		For Academic Year
Donor will send		
\$ Fall \$	Spring	
Scholarship Procedures		
If the donor is sending the check directly to Millikin, we will follow the disbursement instructions supplied by the donor. In the event the instructions are unclear or not supplied, we will assume funds will be disbursed evenly for Fall and Spring.		
In accordance with Federal Over award Regu Millikin makes every effort to reduce the leas		your need-based financial aid may be adjusted.
		Please Initial:
Student Acknowledgement		
I have provided information about the schola are considered a resource.	rship to the best of my ki	nowledge. I understand that all outside scholarships
Student's Signature		Date