



Email completed form to Student Financial Services sfs@mtholyoke.edu

# Outside Scholarship/Award/Resources Notification Form

Student Name (Please Print): \_\_\_\_\_ Date: \_\_\_\_\_

“Outside Scholarship/Award/Resources” are funds awarded to students for educational support by, for example, high school, religious, civic, or other organizations, or tuition benefits from a student's parent's employer.

**Outside Scholarship/Award /Resources Policy:** A student’s student loan and/or student employment included in the original financial aid package is reduced by the amount of the outside scholarship/award/resources. Any funds that exceed the amount of the total originally packaged loan/job reduce the College grant. (A student may request that the Federal Student Loan be reinstated to offset some of the family contribution.) **NOTE:** If a student's determined need is met solely by College need based grant, such as Mount Holyoke Grant or Mary Lyon Legacy Grant, any outside scholarship/award/resource will reduce the College grant dollar for dollar. Please review: [https://www.mtholyoke.edu/sfs/resources/scholarship\\_policies](https://www.mtholyoke.edu/sfs/resources/scholarship_policies) for more information.

Scholarship/Award Name \_\_\_\_\_ Organization Name \_\_\_\_\_  
Contact Person \_\_\_\_\_ Email: \_\_\_\_\_  
Please indicate below, the approximate date the funds will be sent and the total for that semester or, if one check will be sent, the date the funds will be sent and the amount for the year. Please also indicate the total amount of the funds and who the funds will be disbursed to.  
Fall Sems:\$ \_\_\_\_\_ Date: \_\_\_\_\_ Spring Sems:\$ \_\_\_\_\_ Date: \_\_\_\_\_ Full Year :\$ \_\_\_\_\_ Date: \_\_\_\_\_  
Total Amount:\$ \_\_\_\_\_ Check issued to the student or Mount Holyoke? \_\_\_\_\_

Scholarship/Award Name \_\_\_\_\_ Organization Name \_\_\_\_\_  
Contact Person \_\_\_\_\_ Email: \_\_\_\_\_  
Please indicate below, the approximate date the funds will be sent and the total for that semester or, if one check will be sent, the date the funds will be sent and the amount for the year. Please also indicate the total amount of the funds and who the funds will be disbursed to.  
Fall Sems:\$ \_\_\_\_\_ Date: \_\_\_\_\_ Spring Sems:\$ \_\_\_\_\_ Date: \_\_\_\_\_ Full Year :\$ \_\_\_\_\_ Date: \_\_\_\_\_  
Total Amount:\$ \_\_\_\_\_ Check issued to the student or Mount Holyoke? \_\_\_\_\_

- Processing Information:**
- Amounts will be divided equally between semesters unless otherwise indicated
  - Funds indicated as “Disbursed to MHC” will show as pending on your tuition account until the funds are received by the College. The student is responsible for remitting payment to the College for funds indicated “Disbursed to Student.”
  - The student is responsible to insure that the funds are sent to Mount Holyoke College in a timely manner and that the organization’s requirements for awarding the scholarship have been met. Academic transcripts will be sent by request from the student only.

**CERTIFICATION and RELEASE**  
I certify that the information reported on this form is complete and correct to the best of my knowledge. Should any information change, I will notify Student Financial Services immediately. I give Student Financial Services permission to discuss and/or release academic and financial data to the organization listed above.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_