<u>Western Carolina University</u> 2023-2024 Student Athlete Outside Scholarship Certification Form

NCAA Bylaw 15.2.6

| Part I: To Be Completed By The Student Athlete | | |
|--|-----------------------------------|--|
| | | |
| Print Name | ID# | Sport |
| Have you received or do you expect to receive financial assis No, I have not received nor do I expect to receive any out | | |
| No, I have not received nor do I expect to receive any out year. Sign this form and return it to the Financial Aid Off | | the 2023-2024 academic |
| Yes, I have received or expect to receive outside financial Complete the form below and return it to the Financial Ai | | 24 academic year. |
| What is your current cumulative GPA? | Full-time semesters compl | eted? |
| Student Athlete's Signature | Date | Email |
| Award Information | | |
| Part II: To Be Completed By a Member of the Awarding NCAA legislation requires that all student athletes report any aid or from parents or legal guardians). | | |
| Name of Award: | Am | ount \$ |
| Total Amount of Award: Fall Sen | nester Spring | Semester |
| Type of Award Grant Scholarship | □ Other-Specify | |
| Please check the following: 1. Is the awarding individual or organization a representative □ Yes □ No | of WCU's athletics interest | s or athletics booster group of WCU? |
| 2. Must the nominees for this award participate in athletics in | order to be nominated? | □ Yes □ No |
| 3. Is athletics ability a major criterion in the selection process | for this scholarship? | 🗆 Yes 🗆 No |
| 4. Will the scholarship be disbursed through the university an | | |
| 5. Will this scholarship be reissued to this recipient in subseq6. Is the recipient's choice of institution restricted by this awa | | □ Yes □ No □ Yes □ No |
| 7. Other - Please explain: | | |
| What are the criteria for this award? Attach a brochure if the | criteria are described in bro | chure or application. |
| a b | | |
| c | | |
| d | | |
| Print Name of person completing this form | Date | _ |
| Signature of person completing this form | Phone Number | - |
| Please make checks payable to: Western Carolina University and the stu Please return this form to: | dent athlete and mail to Financia | |
| Western Carolina University | | Phone: 828-227-7290 Fax: 828-227-7042 |
| Office of Financial Aid 105 Cordelia Camp | | Web: www.wcu.edu/finaid |
| 1 University Drive Cullowhee,NC 28723 | | E-mail: finaid@wcu.edu |

Office Use Only

| Year In School | | | Earned Hours | |
|-------------------------|-------------------------------------|---------------------------|--------------|--|
| Full Scholarship | Yes | No | | |
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| Comments | | | | |
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| Is this Scholarship cou | Inta <mark>ble t</mark> oward their | Athletic Scholarship: Yes | No | |
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| Director of Athletic C | | | Date | |
| Director of Athletic C | | | Date | |

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