



Departmental Scholarship Disbursement Authorization - Grant Funded

2016-17

Summer II 2016 - Summer I 2017

Scholarship Name _____ Detail Code _____

Scholarship Account Fund ID _____ Dept. Cost Center _____ Account _____

Grant Authorization by _____ *** Grant funded awards (Funds 25-30) MUST be authorized by Grants and Contracts prior to sending to Financial Aid.*

Submission of this form by the department contact listed below serves as verification that you have read and understand the Western Michigan University Undergraduate Scholarship Awarding Policy, located at wmich.edu/finaid/pdf/non-year/ScholarshipPolicy.pdf and that all students receiving a scholarship meet all specified criteria.

Please email as a PDF attachment to finaid-scholarship@wmich.edu. If you have further questions, please contact Bonnie Ayers at (269) 387-6036.

Students' Names First, Last	WIN	Undergrad or Grad	Award Amounts			Date Sent to Fin Aid	Comments
			Sum II '16	Fall '16	Spring '17		
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____
_____	_____	UG_G	_____	_____	_____	_____	_____

Name of Dept. Contact Submitting Award _____ Date _____

Department Name _____ Phone Number _____