

Student Award Request Form



BUDGET COMMITMENT OF FUNDING

Department Name & Contact

This is the Contact for Scholarship Questions.

Dept Name	College	Contact Name	Contact Phone	Email Address
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[This form should be forwarded to your SET Business Center with an email copy to Student Financial Assistance, SFAAccounting@ucf.edu.](mailto:SFAAccounting@ucf.edu)
 The Authorization Statement below is to be signed by the Departmental Scholarship Contact that is requesting the Budget Amendment.
The Department Contact above is not necessarily the person responsible for the Budget Amendment.

I authorize the use of budget funds from our college or department and certify that donor restrictions, if any, have been met.

 Authorized Signature

 Print Name

 Date

 Phone

This is the Contact for Funding Questions.

 Old Dept. ID

 Company ID

 Division ID

 Cost Center ID

 Fund ID

 Total Budget Amendment \$

 Amendment ID

 Program ID

 Grant ID

 Site ID

 FinAid Grant ID

Scholarship/Fellowship Name	Y or N Another award coming this Year?	Check if "NEED" part of donor Criteria?	Y or N Release with less than 12Hrs?	Min. Hours for Award	EMPLID	Student Name	Award Amount	Alien Status	Item Type

Alien Status U = Native US Citizen, I =International Student/Alien Temporary, P = Alien Permanent, N =Naturalized; Award is taxable if student is not a U.S. citizen.
 This information is found on **Peoplesoft:** Campus Community => Personal Information => Identification => Citizenship => Citizenship and Passport

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