

2023-2024 MONARCH OPPORTUNITY SCHOLARSHIP DISBURSEMENT FORM

Please submit no later than the last day of the quarter the award is for.

Form Number (_____/_____/_____)

Dept Fiscal Month Submission

Resource Title _____ <i>(e.g. ABC Award, NSF REU, etc.)</i>	Acct & Ledger Info: <u>7 8</u> _____ / _____ / ____ / _____ <div style="display: flex; justify-content: space-around; font-size: small;"> Account Fund Sub Object </div>
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Perm Number	Name	Award Split	2023-2024 Quarterly Award Amount			
			Fall 2023	Winter 2024	Spring 2024	Summer 2024
		Department Share 50% + Financial Aid Match 50% = Award Total	Department Distribution: \$ _____ + Financial Aid Matching: \$ _____ = Total Award \$ _____	\$ _____ \$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____ \$ _____
		Department Share 50% + Financial Aid Match 50% = Award Total	Department Distribution: \$ _____ + Financial Aid Matching: \$ _____ = Total Award \$ _____	\$ _____ \$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____ \$ _____
		Department Share 50% + Financial Aid Match 50% = Award Total	Department Distribution: \$ _____ + Financial Aid Matching: \$ _____ = Total Award \$ _____	\$ _____ \$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____ \$ _____

Comments:

*By my signature here I have verified the registration status, academic standing, and qualifications of the student(s) listed above and I authorize the Office of Financial Aid and Scholarships to disburse the indicated funds.

Prepared By: _____ Ext. _____ Authorized by*: _____ Signature _____ Department _____ Ext. _____ Date _____

OFFICE OF FINANCIAL AID AND SCHOLARSHIPS USE ONLY			
Fund Code:	Class Code:	Processed by:	Date: