

**The University of Tennessee
Knoxville (UT)
Scholarship Authorization**

Office of Financial Aid & Scholarships
The University of Tennessee
115 Student Services Building
Knoxville, Tennessee 37996-0210
Phone: (865) 974-3131
M-F 8:00 AM - 5:00 PM

Scholarship: _____

Academic Unit: _____

Expense Account #: _____

Person to contact re Award: _____

FUND ID #: _____ (see criteria sheet)

Phone Ext: _____

Name of Recipient				Disbursements
Please check this box, if these funds are awarded for international travel, study, or research <input type="checkbox"/>	Student ID		FL	
	Academic Year		SP	
	Total Stipend		SU	
Please check this box, if these funds are awarded for international travel, study, or research <input type="checkbox"/>	Student ID		FL	
	Academic Year		SP	
	Total Stipend		SU	
Please check this box, if these funds are awarded for international travel, study, or research <input type="checkbox"/>	Student ID		FL	
	Academic Year		SP	
	Total Stipend		SU	
Please check this box, if these funds are awarded for international travel, study, or research <input type="checkbox"/>	Student ID		FL	
	Academic Year		SP	
	Total Stipend		SU	

REVISION OF PREVIOUS AWARD AUTHORIZATION

OFFICE OF FINANCIAL AID SHOULD NOT SEND A SCHOLARSHIP AWARD LETTER

MINIMUM HOURS REQUIRED FOR SCHOLARSHIP: _____

STUDENTS LACKING MINIMUM HOURS WILL BE DIRECTED TO THE ACADEMIC UNIT.

Donor Name(s) and address(es):

Date:

Letter Name:

I authorize the Office of Financial Aid to award the specified scholarship according to the instructions above.

SIGNATURE OF AUTHORIZING OFFICIAL: _____

DATE: _____