



Office of Financial Aid Services

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Bozeman, MT 59717-4160
www.montana.edu/wwwfa

Tel (406) 994-2845
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SCHOLARSHIP REPLY FORM 2009 - 2010

Student Name:

MSU ID:

Name of Scholarship:

I accept this scholarship.

In accepting this scholarship I understand that I must enroll as a full-time student, maintain Satisfactory Academic Progress in accordance with University standards, and meet any other criteria described in the scholarship award letter.

I am unable to accept this scholarship because _____

I understand that donors of scholarships to Montana State University request academic, financial, and/or biographical information for the purpose of determining or maintaining a student's scholarship eligibility. Therefore, I authorize the release of my academic, financial, and/or biographical information to a scholarship donor for the purpose of determining or maintaining my eligibility for a scholarship. I also grant permission to release appropriate information to the MSU Foundation as it applies to this award.

Student Signature

Date

Please complete and return this reply form indicating your acceptance or rejection of the scholarship awarded to you as soon as possible. This form must be returned by mail or fax to the Office of Financial Aid Services at the address or number listed above.