

# Financial Aid Office

1032 West Sheridan Road  
Sullivan Center Room 190  
Chicago, Illinois 60660  
Phone: 773.508.7704

Scan completed form and upload to <https://forms.luc.edu/faupload>



Preparing people to lead extraordinary lives

## 2023–2024 Outside Scholarship Notification

Student Name \_\_\_\_\_ Loyola ID # \_\_\_\_\_  
*Print Name* *11-digit number begins with 0000*

If you are receiving a scholarship from an outside organization, please complete this form. If the check is given to you, please submit the check along with this form to the Financial Aid Office. Be sure to endorse the check if it is made payable to you and Loyola University Chicago. Make copies as needed and use one sheet per scholarship check. Please keep a copy of this form and a copy of the check for your records. If the donating agency is sending the check directly to Loyola University Chicago, please have the check directed to the address below. **Also, it is appropriate and highly recommended that you send a Thank you note to the providing donor/agency.**

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address \_\_\_\_\_ Permanent phone # \_\_\_\_\_

Scholarship Donor /Agency \_\_\_\_\_

Donor/Agency contact person \_\_\_\_\_

Donor/Agency phone # \_\_\_\_\_

The check is enclosed  The check will be mailed separately

Amount on check \$ \_\_\_\_\_ Check # \_\_\_\_\_

Is this scholarship restricted to tuition only? (Circle one) YES NO

Please check the appropriate space.

\_\_\_\_\_ Disburse the entire amount to my Fall 2023 semester.

\_\_\_\_\_ Disburse the entire amount to my Spring 2024 semester.

\_\_\_\_\_ Divide the amount equally between the Fall 2023 and Spring 2024 semesters.

If you do not know if your scholarship is for a specific term, the **entire amount** will be applied to the current semester so long as it does not exceed the term Cost of Attendance (COA) budget.

Mail form and check to:  
Rosana Wilson, Assistant Director  
Loyola University Chicago  
Sullivan Center, Suite 190  
1032 W. Sheridan Rd.  
Chicago, IL 60660

Student Signature\* \_\_\_\_\_ Date \_\_\_\_\_

*\*Typed and digital signatures are not acceptable*

OR 2024