

Tuition Reimbursement Private Scholarship Acknowledgement

Student Financial Services

2500 E. Nutwood Ave. Fullerton, CA 92831 (714) 879-3901 x2202 FAX (714) 681-7421

Student Section:		I	D#		
l,	, will be receivir	ıg a private s	scholarship from _		
	in th	e annual am	ount of \$		·
In order for me to receive this private scholarship:					
The student must:					·
The school must:					·
I understand that the collecting of these funds is my ultin	mate responsibi	lity. If paym	ent is not received	d from the private institut	ion by
October 1, 2021, for the Fall Semester and March 1, 2022, for	the Spring Sem	ester. I will se	end payment for th	e amount due	Please
initial.					
I understand that if payment is not received that I may be wi		-	•		_
Scholarship Donor/Organization Section:					
Name:					
Address:					
Phone Number:	Contact Persor	n:			
We promise to scholarship the above named student in the	amount of \$		Sending \$	each time.	
The scholarship will be paid to the school on a (check one)	□ semesterly	☐ monthly	one time basis.	Please note that no bills will t	oe sent.
We promise to complete the payment of all fur Spring Semester.	nds by Octol	oer 1, 202	1, for the Fall a	and March 1, 2022, fo	r the
We promise, that if there is a change in the amount of the o	riginal award, th	at we will im	mediately notify th	ne school in writing.	
The only stipulations that we have regarding this scholarsh	ip are:				
Student's Sianature			Certifyina Official for th	ne Private Institution	

This document must be returned to the office of Student Account Department before this award can be counted as credit against the account. No refunds will be issued on these funds until the monies have been received by the institution and have been posted to the student's account. (Please do not send funds intending the University to release them for books or personal living expenses. Please send these funds directly to the students.)