Optional

Scholarship Statement of Financial Support

Have your scholarship organization (if applicable) complete this form and mail it to the Office of Admissions as soon as possible so that we may proceed with the processing of your application. If you are receiving more than one scholarship please make photocopies of this form to distribute to each additional organization.

Please print or type

Application for term beginning: ☐ Fall (Sept) Year_____ ☐ Interterm (Jan) Year_____ ☐ Spring (Feb) Year_____

Scholarship name _____

Mailing address _____

Telephone ( ) _____ Fax number ( ) _____

E-mail address _____

This is to certify that our organization is willing to provide financial support for _____
Student's first (given) name Family/surname

for the **annual** amount of $_____ during the course of his/her enrollment at Taylor University.
U.S. dollars

I have included the following documentary evidence of the scholarship organization:

- ☐ Certificate of award
- ☐ Letter from organization
- ☐ Scholarship criteria

AFFIRMATION OF SUPPORT

I hereby affirm or swear that the information provided is accurate and complete, and that the funds have been awarded to:

_____
Student's family/surname

_____ Date
Signature of Scholarship Director

_____ Date
Signature of Notary Public with Seal or Embassy Official

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