



TEXAS A&M
UNIVERSITY
KINGSVILLE®

EXTERNAL SCHOLARSHIP FORM

Granting Agency: _____ Contact Person: _____
 Mailing Address: _____ E-mail: _____
 _____ Phone Number: _____

Check Amount: \$ _____ Check Number: _____
 Scholarship Name: _____
 Academic Year: _____

TAMUK APPLICANT ID	STUDENT NAME	TOTAL PAYMENT	<i>Select ONE appropriate payment box</i>			
			Split Fall/Spring	Fall Only	Spring Only	Summer Only
K00		\$				
K00		\$				
K00		\$				
K00		\$				
K00		\$				

If, at the time of awarding, the student(s) is registered less than full-time (12 hours for undergraduate/ 9 hours for graduate) and/or in a cooperative education program, may this student receive this scholarship? ___ Yes ___ No

In the event a student listed above does not attend TAMUK, withdraws, or falls below the requirements outlined in the scholarship award letter, the university will return funds to the granting agency. In order to receive those funds, please e-mail Andrea Cantu your **W-9**. If unable to provide a W-9, please fill out a Vendor Application Form, https://fmo.tamu.edu/vendor-setup/_media/substitute-w9.pdf.

Please make check(s) payable to Texas A&M University-Kingsville Business Office and mail to:

Texas A&M University – Kingsville Business Office
700 University BLVD, MSC 104
Kingsville, TX 78363

Contact Information:

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 Samantha Silva | Financial Aid Office | 361-593-2883 | Samantha.Silva@tamuk.edu