



Pepperdine University  
Seaver College

Office Use Only:

Name:

CWID:

Sport:

## Outside Scholarship Awarding Form

*(To be completed by awarding agency)*

Foundation Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Contact Person \_\_\_\_\_ E-mail address \_\_\_\_\_

Student/Recipient Name \_\_\_\_\_

Due to NCAA regulations, please circle YES or NO to the following questions regarding this scholarship so that we can determine whether or not the student is eligible to accept this scholarship. If you wish to provide an explanation, please do so on the lines provided or attach additional information.

1. Does this award have any relationship to athletics ability? YES NO  
Please explain: \_\_\_\_\_

2. Is this award from an established and continuing program? YES NO  
Please explain: \_\_\_\_\_

3. Is the recipient's choice of institutions restricted by the donor? YES NO  
Please explain: \_\_\_\_\_

4. Is there a direct relation between the donor and Pepperdine (i.e. alum, donor to Pepperdine)?  
YES NO Please explain: \_\_\_\_\_

5. Does this organization conduct a competitive sports program (i.e. field a sports team)?  
YES NO Please explain: \_\_\_\_\_

6. If yes, was the recipient a member of that team/organization? YES NO  
Please explain: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

PLEASE RETURN THIS FORM **WITH** THE SCHOLARSHIP CHECK TO:

Pepperdine University, Seaver College  
Office of Financial Assistance  
Attn: Seaver Financial Assistance  
24255 Pacific Coast Highway Malibu, CA 90263  
Telephone: (310) 506-6174  
Fax: (310) 506-4746  
E-mail: finaid2@pepperdine.edu