

UNIVERSITY OF NOTRE DAME Excess/Outside Financial Aid (NCAA Bylaw 15.1.3)
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PART I. TO BE COMPLETED BY THE STUDENT-ATHLETE

Name of Student-Athlete	Social Security Number	Sport
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NCAA regulations require that student-athletes report all sources of financial assistance other than that contained in an institutionally approved financial aid package or that which is provided by parent(s) or legal guardian(s). Examples of outside financial aid include, but are not limited to: National Merit Scholarship, High School Booster Club Scholarship, Church Scholarship, Local Civic Club Scholarship.

Please Check One As Appropriate:

NO, I have not received nor do I expect to receive an outside financial aid award issued to me for the 2005-06 academic year. If you indicated NO, please sign and date the form below and return to the Athletic Compliance Office.

YES, I have or expect to receive an outside financial aid award issued to me for the 2005-06 academic year. If you indicated YES, please sign and date the form below and then have a member of the award=s selection committee complete the remainder of this form and return it to the Athletic Compliance Office. If you received multiple awards, it is necessary for you to complete one of these forms for each award. Please contact Mike Karwoski in the Athletic Compliance Office for additional copies of this form.

Student-Athlete=s Signature	Date
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PART II. TO BE COMPLETED BY A MEMBER OF THE AWARDING AGENCY=S SELECTION COMMITTEE.

AWARD CRITERIA: Please answer the following questions regarding the award and the selection criteria if applicable to this student.

NAME OF AWARD _____

AWARDING AGENCY _____ TOTAL AMOUNT OF AWARD \$ _____

LIST ALL CRITERIA USED IN THE SELECTION PROCESS OR ATTACH A LIST TO THIS FORM _____

BASIS OF THE AWARD: Please check the statement that best indicates the importance given to the recipient=s athletics ability and athletics participation in the selection process.

- The award was made on the basis of the recipient=s past performance and overall record, as measured by established criteria of which **athletic participation was a major criterion.** *
- The award was made on the basis of the recipient=s past performance and overall record, as measured by established criteria of which **athletic participation was not a major criterion.** *
- The award had **no relationship to athletic ability.**

*If athletic participation was a part of the criteria utilized for selection to receive this award, was the recipient required to be a member of a sports team to qualify for the award? Yes No

PURPOSE OF THE AWARD: Please check the statement that best indicates the desired purpose of the award. Then complete the remainder of this form.

- The award was made with the understanding that it was earmarked for educational expenses or considered to have educational purposes.
- The award was not earmarked for educational expenses and was presented to the recipient for use for pre-college expenses and/or his/her own personal use.

PROGRAM BACKGROUND: Please describe your scholarship program by answering the following questions.

1. Is this an established and continuing scholarship program formed to recognize outstanding high school graduates? Yes No
2. Is the awarding individual, organization, and/or donor of this scholarship a representative of the athletics interests of the University of Notre Dame? Yes No
3. Is the awarding agency an outside sports team or organization that conducts a competitive sports program? Yes No
4. Is the recipient eligible to receive this aid if enrolled at an institution other than the University of Notre Dame? Yes No

DISBURSEMENT: NCAA regulations require that your funds be disbursed through the University of Notre Dame, Office of Financial Aid, 115 Main Building, Notre Dame, Indiana 46556, if they are awarded to a student-athlete.

1. Have the funds for this award already been disbursed directly to the recipient? Yes No
2. How and when did/will the agency transfer funds?
 By check directly to the recipient at the time the award was presented.
 By check at the beginning of the academic year sent to the University.
 By check at the beginning of the academic year sent directly to the recipient.
 By check at the beginning of each term and sent to the University.
 By check at the beginning of each term and sent directly to the recipient.
 Other _____
3. Period of Award _____ to _____
4. Will this scholarship be reissued to this recipient in subsequent years? Yes No

Name of Contact Person/Person Completing Form _____ Title _____

Institution, Agency or Funding Organization _____ Telephone Number _____

Street Address _____ City _____ State _____ Zip Code _____

Signature _____ Date _____

PLEASE RETURN COMPLETED FORM TO:

University of Notre Dame
Athletic Compliance Office
113 Joyce Center
Notre Dame, IN 46556
(574) 631-8090 Phone
(574) 631-9229 Fax