

SCHOLARSHIP AWARD ACCEPTANCE FORM

Social Security Number Award: Notre Dame Award*	
 earns a minimum of 12 graded c maintains good academic standi remains continuously enrolled a 	ng throughout her four years, and
This scholarship applies to full time program of study in the Women's College and is non-transferable to specialized programs such as 3-2 dual-degree study or School of Pharmacy.	
the large number of qualified students, you number of scholarships available for the	e University within three weeks of receipt of this letter. Due to our timely response will allow the University to determine the next round of awarding. Acceptance of the scholarship is not the May 1 st is the National Candidate Reply Date for all bides by that date.
The University reserves the right to fund the institutional dollars awarded in this scholarship using various sources of funding. Changes to the source of funding can be made at the University's discretion based on the Financial Aid Awarding policies. Students will be notified of any changes.	
I would like to accept this offer of schola	rship as a member of the incoming class.
Student Signature	Date