

- Please complete as much information as possible.
- Checks should be payable to Sam Houston State University
- Do not make checks payable to the student

Student Information

First Name:	MI	:	Last Name:	
Sam ID: (nine digit number, r		or		
Donor Information				
Organization/Donor:				
Address:			Phone:	
City:	St:		Zip Code:	
Is the scholarship for: Fall	Spring		Split Fall/Spring	Summer
Must the student be enrolled in	12 hours or m	ore to re	ceive scholarship	
Yes No				
Mailing Address: SHSU	Physical Address (overnight, FedEx, UPS) SHSU			
Student Account Services		Student Account Services		
ox 2273 1905 University Avenue				
Huntsville, Tx 77341-2273		Estill Bldg Suite 103		
		Huntsv	ille, Tx 77340	
Student Account Services Cor	ntact Informat	ion		
Email: cshforms@shsu.edu				

Email: <u>cshforms@shsu.edu</u> Phone: 936-294-1083 Fax: 936-294-1229