



## Outside Resource Form 2019-2020

Office of Financial Aid and Scholarships

P.O. Box 3011 Commerce, Texas Phone: 903.886.5096 Fax: 903.886.5098

[FAO.Verification@tamuc.edu](mailto:FAO.Verification@tamuc.edu)

**STUDENT'S NAME:** \_\_\_\_\_ **CWID:** \_\_\_\_\_

It is the student's responsibly to notify the Financial Aid & Scholarship Office of all ***outside resources***. ***Outside resources*** are first used to meet any unmet need. They are then used to reduce need-based, self-help (loans and/or Work Study) and then gift aid. Any outside resource added that results in the student's aid being over financial need and/or the Cost of Attendance may result in a reduction of need-based aid.

**Outside Resources** include but are *not limited* to:

- Outside Scholarships (Organizations, high school, church, etc.)
- DARS (Texas Department of Assistive and Rehabilitative Services)
- Employer Benefits
- Outside Private Loans (this does not include Federal Direct Loans, Perkins, or PLUS loans)

### Scholarship/Resource Information

Resource/Award Name	Amount	Amount is for?	Will you receive this award again?	Check will be payable to?
	\$	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	<input type="checkbox"/> No <input type="checkbox"/> Yes, for _____ years	<input type="checkbox"/> Texas A&M-Commerce <input type="checkbox"/> Student
	\$	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	<input type="checkbox"/> No <input type="checkbox"/> Yes, for _____ years	<input type="checkbox"/> Texas A&M-Commerce <input type="checkbox"/> Student
	\$	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	<input type="checkbox"/> No <input type="checkbox"/> Yes, for _____ years	<input type="checkbox"/> Texas A&M-Commerce <input type="checkbox"/> Student
	\$	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	<input type="checkbox"/> No <input type="checkbox"/> Yes, for _____ years	<input type="checkbox"/> Texas A&M-Commerce <input type="checkbox"/> Student
	\$	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	<input type="checkbox"/> No <input type="checkbox"/> Yes, for _____ years	<input type="checkbox"/> Texas A&M-Commerce <input type="checkbox"/> Student
	\$	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	<input type="checkbox"/> No <input type="checkbox"/> Yes, for _____ years	<input type="checkbox"/> Texas A&M-Commerce <input type="checkbox"/> Student

**Certification and Signature:** Each person signing this worksheet certifies that all of the information reported on it is complete and correct.

**WARNING:** If you purposely give false or misleading information, you may be fined, sent to prison, or both.

After completing please print, sign and you can fax it to our office at (903)886-5098 or you can send as an attachment to [FAO.Verification@tamuc.edu](mailto:FAO.Verification@tamuc.edu). When received and your record is updated you can track it through your myLEO. Note: We may require additional documentation if needed.

\_\_\_\_\_  
Student's **Printed Name**

\_\_\_\_\_  
Student's **Signature**

\_\_\_\_\_  
Date