CSUDH | TORO AUXILIARY PARTNERS

SCHOLARSHIP REQUEST

Section 1: Basic Information	
DATE:	COLLEGE/DEPARTMENT:
REQUESTOR CONTACT NAME:	EXTENSION/EMAIL:
ACCOUNT NAME:	SCHOLARSHIP NAME: (IF DIFFERENT FROM ACCOUNT NAME)
ACCOUNT NUMBER:	OBJECT CODE:

Section 2: Recipient Information

Recipient #	Student ID	Student Name	Semester and Year	Amount
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
Please attach additional page for additional recipients, if necessary.			GRAND TOTAL:	$ 0.00

Section 3: Required Signatures

☐ By checking this box, the person preparing this form and the authorized signers confirm that students listed meet donor intent/grant agreement requirements.

☐ By checking this box, the person preparing this form and the authorized signers confirm that there is sufficient funds in the account for the requested disbursements.

	NAME	SIGNATURE	DATE
ARM/Fiscal Officer Approval:			
Dean/VP/AVP Approval: (Required for amounts totaling $750 and above)			

Section 4: Submission

Please submit completed form as follows:

- **PF Accounts (6XXX, 8XXX):** csudhpf@csudh.edu
- **All other TAP/OSRP Accounts (5XXXXX, 9XXX):** auxiliarypartners.procurement@csudh.edu
- CC: rornelas@csudh.edu and scholarships@csudh.edu.
- Please note that scholarship requests have a 7 to 10 business-day processing time.

GO TOROS!

FOR TORO AUXILIARY PARTNERS/PF USE ONLY

ACCT. BALANCE	PROCESSED BY	DATE	PURCHASE ORDER #
TAP/PF Accounting Approval:		TAP E.D. Approval (over $50,000):	

CSUDH | TORO AUXILIARY PARTNERS

SCHOLARSHIP REQUEST

Additional Recipients				
Recipient #	Student ID	Student Name	Semester and Year	Amount
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
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29				
30				
31				
32				
33				
34				
35				
36				
37				
38				
39				
40				
			GRAND TOTAL:	$ 0.00

FOR TORO AUXILIARY PARTNERS/PF USE ONLY

ACCT. BALANCE	PROCESSED BY	DATE	PURCHASE ORDER #
TAP/PF Accounting Approval:		TAP E.D. Approval (over $50,000):	