



**Financial Aid Office**

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FA30-24/25 (5/24)-FSRNF

**Scholarship & Resource Notification Form  
 2024-2025**

Student's Name \_\_\_\_\_ UWL ID# \_\_\_\_\_

Name of Scholarship(s)		Amount For 24-25	Financial Aid Office Use
_____	<input type="checkbox"/> Renewable _____ yrs.	\$ _____	
_____	<input type="checkbox"/> Renewable _____ yrs.	\$ _____	
_____	<input type="checkbox"/> Renewable _____ yrs.	\$ _____	
_____	<input type="checkbox"/> Renewable _____ yrs.	\$ _____	
_____	<input type="checkbox"/> Renewable _____ yrs.	\$ _____	
_____	<input type="checkbox"/> Renewable _____ yrs.	\$ _____	
<b>Total</b>		\$ _____	

Other Resource(s)	Amount for 24-25	
<input type="checkbox"/> Graduate Assistantship	\$ _____	
<input type="checkbox"/> Non-Resident Tuition Waiver	\$ _____	
<input type="checkbox"/> Residence Hall Assistant	\$ _____	
<input type="checkbox"/> Employer Tuition Reimbursement	\$ _____	
<input type="checkbox"/> Vocational Rehabilitation	\$ _____	
<input type="checkbox"/> Wisconsin GI Bill Tuition Waiver	\$ _____	
<input type="checkbox"/> National Guard Tuition Reimbursement Grant	\$ _____	
<input type="checkbox"/> Federal Military Tuition Assistance (TA)	\$ _____	
<input type="checkbox"/> Other State VA Benefits	\$ _____	
<input type="checkbox"/> Other _____	\$ _____	
<b>Total</b>		\$ _____

**If you learn of additional scholarships or educational resources after you have returned this form, you must notify us in writing or on your WINGS Student Center. These outside resources may reduce the amount of the financial aid already offered, typically reducing the amount of loan eligibility first. We will notify you by campus email if a change is needed because of these additional resources.**

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

\_\_\_\_\_  
 Date