graduation and has a diploma fee posted?



Request for New Scholarship FAMIS Account and/or Compass Fund Code (College Station, Galveston & HSC)

Note: This process can take between 7 - 10 business days to complete, depending on the time of the year

** Failure to complete this form in its entirety may cause delays in account or fund code set up **

New FAMIS Account Number New Compass Fund Code *Select Type of Request(s):* Section I - Department Information Department _____ Dept. Code Department or College Contact Name Email Address Section II - Account Information PLEASE PROVIDE THE FOLLOWING INFORMATION FOR YOUR NEW ACCOUNT AND/OR FUND CODE Please indicate the semester and year you wish to begin using this fund: (Example: Fall 2017, Spring 2018) Name of Account FAMIS Account Number (Circle one) 02 10 23 (account numbers should begin with the campus code - 02 for College Station, 10 for Galveston and 23 for the Health Science Center; followed by the account number and a sub-account if available. If there is no sub-account, enter "00000" - 5 zeroes) FAMIS Account Function Code (15 - Research; 60 Scholarships/Fellowships) Is this a **scholarship or fellowship**? ☐ SCHOLARSHIP ☐ FELLOWSHIP How should **fellowship** be paid? Lump Sum (once per semester) Multiple Disbursements (monthly) Please check one **Object Code** 5910 Undergraduate 5915 Graduate 5920 Professional OR 5928 Pass-thru **Award** (Only for funds received from outside of Texas A&M and students are selected by that entity) Indicate the maximum individual award amount (per year) for this fund \$ Indicate the maximum number of <u>semesters</u> that fund is awarded to an individual student (# of semesters: 8,4,2,1) Indicate the minimum enrollment a student must carry in order to receive this fund (Full time = 12 hours for undergraduate/professional and 9 hours for graduate) Section III - Fund Source/Account Preference **Funding Source Information:** ☐ Foundation (F) Account #: ☐ Association (A) ☐ Fiscal (S) Where the funds be held? If funds are from a donor or organization: Would you like grade reports for recipients of this fund? \square YES \square NO \square N/A Would you like for recipients to write a thank you letter to donor?

YES
NO
N/A ☐ YES ☐ NO ☐ N/A Are recipients selected by the donor? Does the donor of this fund wish to remain anonymous? ☐ YES ☐ NO ☐ N/A ☐ YES ☐ NO ☐ N/A Is the donor of these funds deceased? May a student receive these funds if enrolled less than minimum enrollment noted above requirement due to co-op, internship, ☐ YES ☐ NO or study abroad trip? May student receive these funds if enrolled in less than minimum enrollment requirement noted above for final semester before

☐ YES ☐ NO

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