Missouri Western State University

Athletics Tender of Assistance Agreement Worksheet

Prospect's Full Legal Name (including middle initial), i.e., don't put Chris if the name is "Christopher" or "Christina."

Name:_____SSN:_____

Permanent Address:_____
Street City State ZIP

Telephone Number:_____ Sport:_____D.O.B._____

Prospect's Current Status: H.S. Senior:_____ 2-4 Transfer: _____ 4-4 Transfer:_____

Name of School_____ Date of Graduation _____

Amount of Tender / Percent of a Full Grant in Aid: _____

Please Check One: _____ Total to include all financial aid (Allows MWSC to recover the dollars from the Pell Grant)

_____ Total to include only "countable" financial aid (Protects MWSC from surpassing limits)

_____ Specific Stipulations: _____

Period of Award: _____Academic Year _____First Semester _____Second Semester

Type of Award: _____Initial Award _____Renewal _____Reduction

Financial Aid to be applied in the following order (subject to approval of Director of Athleticss):

_____Books: Amount ($200/semester)_____

_____In-State Tuition and Fees: _____credit hours

_____Out-of-state Tuition and Fees: _____credit hours

_____Room and Board (on campus)

_____Off-campus room allowance (Only if student is receiving less than $5,000 in institutional aid)

Signed (Head Coach):_____ Date:_____