



REQUEST TO HOLD SCHOLARSHIP AWARD

Student Name _____

UV ID # _____

Address _____

Phone _____

Street, City, State, Zip

Award Information: Year Awarded: _____ Department (if applicable): _____

If you wish to request a HOLD for your scholarship award, you must complete this form and upload it to the Financial Aid and Scholarships Office. Be specific and detailed. You must also upload documentation to support your request (physician’s statement, military orders, mission call/letter from Ecclesiastical Authority, or other related information). Scholarships (except privately funded and the Non-Resident Waiver) may be held for up to two years for the following reasons: military service, church service, humanitarian service, or for certain documented medical circumstances. A scholarship cannot be held while a student attends another institution of higher education.

All documents must be in PDF format to upload: To upload: Log in to myUVU, go to Students, Paying For My Education, inside the Aid Tools box click on Financial Aid File Upload, select the appropriate Aid Year, choose your document by clicking the Browse Button in the “Select File for Import” field, Submit file.

Absence from Utah Valley University of more than seven semesters will require an application for readmission.

Once the documentation for the Request to Hold Form has been processed, you will be notified through your myUVU email if the request has been approved or denied. Documentation must be uploaded to the Financial Aid and Scholarships Office. Please print a copy for your records.

I. List your reasons for your request to HOLD your scholarship: (use additional pages if needed)

II. Date you plan to leave UVU: _____

III. Date you plan to return to UVU: _____

IV. Student Certification:

I certify that all statements in this request and all verification documents are true and accurate. I understand and agree that I must provide verification of statements I have made, and submitted the Request to Hold form. I also understand that if documentation is insufficient or not attached, or if this request is not signed, my request will be denied.

Student Signature

Date

OFFICE USE ONLY:

Scholarship Type: Dean’s Merit Distinguished Merit Exemplary Presidential Outstanding Merit other

Received by : _____ (please print name) Date: _____

Noted on RHACOMM Date: _____ Initials: _____