



YOUNGSTOWN  
STATE  
UNIVERSITY

## SPRING 2018 SCHOLARSHIP for NEW APPOINTMENT ONLY

### Graduate College Premiere Scholarship 36.0

#### Spring 2018 New Only

ACKNOWLEDGEMENT AND APPROVAL FOR THIS STUDENT BY THE COLLEGE DEAN OR ALTERNATE  
FINANCIAL MANAGER, if applicable

Student's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

Student ID: \_\_\_\_\_ Graduate Program: \_\_\_\_\_

College Dean's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ College: \_\_\_\_\_

- Spring 2018 New Only: If student will be registered for Summer course, the scholarship will automatically be renewed, if the College of Graduate Studies not notified by 5-15-18.

Is this funding part of your College allocation? Yes No

If not, the responsible financial manager must complete the next section providing the approved budget name and FOAPAL.

Funding Source FOAPAL for Graduate College Premiere Scholarship 36.0	Fund	Organization	Account	Program

Alternate Signature, Financial Manager/Grant PI

If required: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Other Budget Source: \_\_\_\_\_

- Spring 2018 New Only: Spring 2018

#### GRADUATE COLLEGE PREMIERE SCHOLARSHIP 36.0

ACKNOWLEDGEMENT AND APPROVAL FOR THIS STUDENT BY  
THE COLLEGE OF GRADUATE STUDIES DEAN

Approved: \_\_\_\_\_ Not Approved: \_\_\_\_\_ Exception Noted: \_\_\_\_\_

- Spring 2018 New Only: \_\_\_\_\_ Spring 2018

College of Graduate Studies Dean's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: Sal Sanders, Dean, College of Graduate Studies

Comments: \_\_\_\_\_