

HACU 2024-2025 ACADEMIC SCHOLARSHIP PROGRAM ENROLLMENT & CLASS LEVEL VERIFICATION FORM

INSTRUCTIONS:

This enrollment verification form is required for students to receive scholarship funds through the Hispanic Association of Colleges and Universities' (HACU). It must be signed by an authorized school official (i.e., Academic Advisor, Registrar's Office, Financial Aid Office) and submitted to the HACU Scholarship Department.

- **PART I** Completed by the **Student**.
- PART II Completed by the Authorizing School Official. (i.e., Academic Advisor, Registrar's Office, Financial Aid Office)

PART I. COMPLETED BY THE STUDENT (PLEASE PRINT)				
I am a degree seeking student currently enrolled at an accredited College/University:				
Enrollment Status: 🛛 Full-Time	e 🗌 Part-Time 🛛	Enrollment Type: 🗆	2-Year (Community College)	4-Year (University)
Enrollment Term/Year: Fall 2	024 🗌 Spring 2025 🗌 S	ummer 2025	Degree Seeking Type:	
Class Level: Major:			_ Expected Graduation Date:	
Print Student's Name	University/College Name			
Student Signature	Date Signed		Student School ID#	
PART II. COMPLETED BY AUTHORIZED SCHOOL OFFICIAL (PLEASE PRINT)				
I hereby certify that the sturk knowledge, the information		an acceptable aca	ademic standing, and to	the best of my
Name of Authorizing School Official ((i.e., Academic Advisor, Registrar's Off			Title	
Phone Number	Phone Extension	Phone Extension		
Signature of Authorizing School Offici (i.e., Academic Advisor, Registrar's Offici			Date Signed	
Scholarship Check – College/Universit (Mailing address where the scholarshi		-		
CITY (College/University)	STATE (College/Un	iversity)	ZIP CODE (College/Unive	ersity)
			<u>scholarship@hac</u>	
The Hispanic Association of Colleges and Universities				