



### Final School Decision Form [Form 2a]

Please submit this form **AS SOON AS** you have made your **final college decision** and have received your final financial aid award letter. This form **MUST** be received **NO LATER THAN** your scheduled Financial Interview appointment. Submit this form along with the following: 1) your acceptance letter, 2) your financial aid award letter and 3) a printout from the school’s website or a letter stating the school’s 2023-2024 cost of attendance (COA), i.e. the total cost used for computing financial aid by that school’s financial aid office, including tuition, fees, room and board and books) and 4) a list of any and all known financial aid you will be receiving from any source not listed on my Financial Aid Award Letter.

I, \_\_\_\_\_ have notified the admissions office of \_\_\_\_\_  
Your name Full name of college choice  
\_\_\_\_\_, located in \_\_\_\_\_  
City and State

that I will be attending their school for the 2023-2024 year, starting in:  
Summer of 2023 \_\_\_\_\_ Fall of 2023 \_\_\_\_\_ Spring 2024 \_\_\_\_\_  
(Please note: SFIRC does not provide funding for the summer term; all scholarship funding will begin for the fall 2021 term)

The cost of attendance (COA) for this school is \$ \_\_\_\_\_. This amount reflects costs for the academic year (circle one) 2023-2024 or 2022-2023. (Please search the website for the 2023-2024 cost, but if it is not yet available provide data for the current year.)

I intend to pursue a degree program in (please list your declared major) \_\_\_\_\_  
\_\_\_\_\_ the college of \_\_\_\_\_ (example: business, engineering, nursing, etc.).

- ◆ I have attached/enclosed my **Acceptance Letter**, my **2023-2024 Financial Aid Award Letter** from this school and a letter/printout of the most current **Cost of Attendance**, if it is not outlined on my Financial Aid Award Letter.
- ◆ I have also enclosed a list of any and all financial aid I will be receiving from any source not listed on my Financial Aid Award Letter, as known to me today.
- ◆ I acknowledge that **I am responsible for disclosing all financial aid awards to Scholarship Foundation as soon as they are known to me** and that if I fail to do so, my eligibility for funding may be forfeited.

**Applicant Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**This form must be signed and returned to Scholarship Foundation with the required documents PRIOR TO or DURING your Financial Interview.**  
(You will receive your Financial Interview date by email in March or early April.)

Incomplete files will not be considered.  
Call us at 772-569-9869 if you have questions or concerns about getting this required information prior to our deadlines for reasons beyond your control.