We are pleased to name you the recipient of a Downs Scholarship in the amount shown on your enclosed offer notification.

Academic ability and performance, talent in selected fields and financial need have been taken into consideration in selecting you as a recipient.

The terms of Mrs. Downs' gift require that you recognize a moral obligation to assist others by signing and returning the enclosed statement agreeing to repay the scholarship, if able, in the future.

<u>Upon receipt of this signed form, we will credit your student account with the amount of your scholarship.</u>

To receive consideration for renewal of this Downs Scholarship you must remain enrolled as a full-time student and maintain at least a 3.000 grade point average. Also, you must re-file the CSS Profile for need-based aid each year.



Thomas Lucius Downs, Jr. & Grace Pate Downs Scholarship Information

Please sign and return this form to:				
Division of Enrollment Services Student Financial Services P.O. Box 750181 Dallas, Texas 75275-0181				
I acknowledge that I am a recipient of t Scholarship Fund. I recognize that I have able, in the future so that the money wi	ve a moral obligation to r	repay any or all of th		
Date	Signature	Signature		
	Typed or Printed Name			
	SMU ID Number			
	Permanent Address			
	City	State	Zip	
Total awarded: \$ Academic Year:				



Thomas Lucius Downs, Jr. & Grace Pate Downs Scholarship Information

Division of Enrollment Services Student Financial Services P.O. Box 750181 Dallas, Texas 75275-0181

Scholarship Fund for the current act or all of the funds advanced, if able,					
Date	Signature	Signature			
	Typed or Prin	nted Name			
	SMU ID Nun	nber			
	Permanent A	Permanent Address			
	City	State	Zip		
Total awarded: \$					
Academic Year:					

I acknowledge that I am a recipient of the Thomas Lucius Downs, Jr., and Grace Pate Downs