

Please fill out the form below		■ My Submitted Requests
Studen	nt ID:	
First Name:		
Last N	lame:	
UTRG	V Email:	
11.00	tation of Grant Payment kug 20, 2021, your student account shows a balance owed to UTRGV of §	for the Fall 2021. Please indicate your preference below:
0	Yes, I give UTRGV authorization to apply the funds awarded to me under the Coronavirus Response and Relief Supplemental Appropriations Act of 2021 towards any outstanding balance in my UTRGV student account. Any funds remaining after my balance has been paid in full, will be disbursed directly to me. I understand that choosing this option is not a requirement to accept and receive this award.	
0	No, I do not authorize UTRGV to apply funds towards my student account as I either do not owe a balance or I need these funds for other educational costs. I understand these funds will be disbursed directly to me.	
and ag		ccess this form, and that I have not disclosed the username and password to anyone else. I understand ovided may constitute grounds for disciplinary action under UTRGV Handbook of Operating Procedures equire repayment of funds awarded.
-	Submit	Reset