



University of Wisconsin-Milwaukee
Chancellor's Graduate Student Award
Award Response Form

(Award Period)

Thank you for your offer of a University of Wisconsin-Milwaukee Chancellor's Graduate Student Award. I have read the enclosed Award letter and accompanying Graduate Student Award Fact Sheet.

I accept the terms of the Chancellor's Graduate Student Award as described.

I decline this award.

Signature

Date

Name (Please Print)

Graduate Program

E-mail Address

Phone Number

Please Return this Form to

