



# Resource Aid Requisition

(Please email form to resourceaid@uoregon.edu. Business Affairs Office, Student Billing.  
If using grant funds, send to Sponsored Projects Services for approval)

Department \_\_\_\_\_ A/R Detail Code \_\_\_\_\_ Doc No. \_\_\_\_\_

Account Name \_\_\_\_\_ Academic Year \_\_\_\_\_

Index	Fund	Organization	Account	Program	Activity

**Aid may be used for:** (check all that are appropriate)

Tuition                      Mandatory Fees                      Not Restricted  
Other, (please specify) \_\_\_\_\_

**Aid restricted to:** (check only ONE in each column)

Undergrad    Full time only  
Graduate    Min Credit Hours \_\_\_\_\_  
Law

UO ID	Student Name	\$ Fall	\$ Winter	\$ Spring	\$ Summer
<b>Total</b>					

**Signatures:**

	Name	Signature	Phone	Date
Department				
Sponsored Projects				
Business Affairs				