



PUBLICITY RELEASE
Financial Aid and Scholarships
205 Administration Bldg.
Martin, TN 38238

ACADEMIC YEAR: _____

SCHOLARSHIP AWARD NAME: _____

STUDENT NAME: _____

STUDENT ID #: _____

HOME ADDRESS: _____
(Street) (City) (State) (Zip)

COUNTY: _____

FATHER'S NAME: _____

ADDRESS: _____

MOTHER'S NAME: _____

ADDRESS: _____

HIGH SCHOOL: _____

PROBABLE COLLEGE MAJOR(S): _____

HOMETOWN
NEWSPAPER(S): _____

I do not object to my personal data being used by UT Martin for publicity purposes.

Your Signature: _____ Date: _____

UTM Classification (Please check one.)

Beginning Freshman

Freshman

Sophomore

Junior

Senior
