



NCV-TTAP Decline of Scholarship Funds

Recipient Name: _____

Date: _____

This is to certify that I, _____, a recipient of the NCV-TTAP Training Assistance Scholarship, am knowingly refusing all or part of the awarded scholarship.

I am refusing the following:

- The entire Scholarship Award
- Registration
- Mileage
- Airfare
- Lodging
- Meals
- Uber/Taxi/Shuttle
- Luggage Fees
- Parking/Airport Parking

Brief Explanation:

Recipient Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____

Email to : tonia.nantkes@nebraska.gov

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