

Miss New Hampshire Scholarship Foundation

UNIFORM SCHOLARSHIP REQUEST FORM FOR MISS NEW HAMPSHIRE STATE & LOCAL REQUESTS

TO: _____ Local Program or Miss NH Program

FROM: Contestant: _____

Today's Date: _____

Date of Program * for which I am requesting funds: _____ Month & Year

I affirm that I have exhausted all funds awarded at any Miss NH local or state competition that were earned prior to the date on which the scholarship money requested by this application was awarded. (Example: If I won money at Miss Derry in June 2012 and Winnipesaukee in July 2012, those funds would need to be used entirely prior to request scholarships earned at Miss NH in April 2013. See scholarship rules attached to your contract.)

Signature of Contestant or
Legal Guardian/Parent if under 18 _____

Amount requested: \$ _____ Date that you need funds: _____

Important: **Make sure you request all local funds directly from the local chapter,** and state funds from the Miss NH Office. **ATTACH** a tuition bill or other documents supporting your request. Please be sure to include Payee's Taxpayer ID number if funds to an individual, such as a landlord. This may be the individuals Social Security Number or an Employer ID Number. Request a form for this from Miss NH office if needed. To whom should the check be made payable (School, book store etc.):

To whom should the check be made payable: _____

To whom should the check be mailed: _____

Address: _____