

**MISS NEW HAMPSHIRE  
UNIFORM SCHOLARSHIP REQUEST FORM**

Program Name: \_\_\_\_\_

Date of Program: \_\_\_\_\_ (MM/YYYY)

Candidate Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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 you earned scholarships at Miss Strafford County in August 2021, those funds would need to be used entirely prior to requesting scholarships earned at Miss NH in April 2022. See scholarship rules attached to your contract.)

**Signature of Candidate:** \_\_\_\_\_  
(Or Parent/Legal Guardian if under 18 years old)

Today's Date: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

Date that you need funds: \_\_\_\_\_

**Important:** Make sure you check with your Local chapter to confirm they have turned your funds over to the Miss New Hampshire Foundation. Most Local scholarship funds are held by the Foundation. All state funds are held by the Foundation.

Check made payable to: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Student ID#: \_\_\_\_\_  
(If we are applying payment to a tuition bill)

Student Loan#: \_\_\_\_\_  
(If we are applying payment to a student loan)