

ENMU-Roswell Foundation

ENMU-Roswell Desk and Derrick Club Scholarship Application

Semester Applying for: **Fall** _____ **Spring** _____

The purpose of this scholarship is to provide financial assistance for tuition, fees, books, and/or tool expenses for a student attending ENMU-Roswell. This scholarship will be offered each Fall and Spring semester and will be awarded based on need. The amount of the award and the number of students selected each semester will be at the discretion of the selection committee.

Consideration shall be given to students who:

- Are U.S. Citizens
- Are New Mexico residents (with preference to Chaves County residents)
- Are a new or continuing student with a cumulative GPA of 2.5 or higher
- Are enrolled in 12 credit hours or more
- Are seeking an associate degree in Welding Technology, Occupational Safety Engineering and Environmental Management Technologies, or Automotive Technology or seeking a certificate in Commercial Driver's License (CDL) (Other *certificate programs are not eligible*).
- Demonstrate unmet financial need as determined by the Financial Aid Office by submitting the Free Application for Federal Student Aid (FAFSA). All requirements to complete the financial aid file must be processed and finalized prior to submitting this application.

Name: Last _____ First _____ Middle _____

ENMU-Roswell Student ID Number: _____ Age: _____

Local Address: _____
(Street) (City) (State) (ZIP Code)

Best Telephone Number for Contact: (____) _____ Email Address: _____

Program of Study: _____ Anticipated Graduation Date: _____

***Please obtain and attach a current transcript (a student copy is sufficient)**

***Please write and attach a brief explanation of your career objective and educational goals**

***Please write and attach a brief description as to how this scholarship would impact your educational goals**

I certify that the information I have supplied on this application is complete and accurate to the best of my knowledge, and I understand that knowingly submitting inaccurate or false information will result in the denial or loss of any scholarship awards. I also understand that incomplete applications will not be considered. I do hereby consent to the release of information concerning my academic and financial status to scholarship donors.

I understand that if I am chosen as a recipient, I must also send **a letter of thanks to the donors of this scholarship** prior to receiving any funding.

Student Signature: _____ Date: _____

Return completed applications via mail or in person:

Eastern New Mexico University-Roswell
Financial Aid Office-Student Services Building
52 University Boulevard
P.O. Box 6000-Roswell NM, 88202