



Office of Financial Aid and Scholarships

New Mexico State University
 Alamogordo Campus
 2400 North Scenic Drive
 Alamogordo, NM 88310
 finaidnmsua@nmsu.edu
 575-439-3855

Scholarship Transmittal Form

Date: _____

Amount to be applied to each term:

(Please check the box beside each term that the scholarship will apply and enter the amount that will be applied to each term.)

- Fall 20__ \$ _____
- Spring 20__ \$ _____
- Summer 20__ \$ _____

Is student required to enroll full-time?

- Yes
- No

Additional Comments/Instructions

Check Number: _____

Donor Information

**Please note that if funds have to be returned, they will be returned to the address provided.

Organization: _____

Contact Person: _____

Address: _____

Phone: _____

Email: _____

PLEASE SPECIFY if funds may be disbursed to student as a refund.

Last Name	First Name	Aggie ID#	Fall Amount	Spring Amount	Summer Amount	Total Award

Please make checks payable to: New Mexico State University

Please mail this form with the check(s) attached to: Financial Aid and Scholarship Services
 New Mexico State University
 Alamogordo Campus
 2400 North Scenic Drive
 Alamogordo, NM 88310

If you have any questions, please contact the Financial Aid office at 575-439-3855.