NEW MEXICO ASSOCIATION OF COUNTY AGRICULTURAL AGENTS FOUNDATION INDIVIDUAL SCHOLARSHIP APPLICATION FORM

Attach additional pages as needed to submit complete information. Submit to the NMACAA Foundation Secretary at least 30 days prior to the event.

Name	
	State Zip Phone: Cell ()
	Office ()
Present position	
Years in position	NMACAA Member as of March 15, current year? ☐ Yes ☐ No
Amount requested from	MACAA Foundation \$
Description and purpose	f activity to be funded
Dates that you will atten	the course, tour, or event
Has applicant ever recei	d an NMACAA Scholarship? \square Yes \square No \square If yes, give total amount received:
\$	
activity itinerary, travel	plan for training or event (sponsoring institution, location, course or event dates and ans). Attach agenda.
2. State how this training	or event will help increase your competency as an Extension worker.

tuition, fees, books, supplies, travel, lodging, meals, etc.). This will be the same as yo out-of-county travel request.	ur out-of-state or
Meals: #meals @	\$
Lodging:	\$
Plane (economy):	\$
Auto: Official Vehicle Private Vehiclemiles @/mile	\$
Rental Car:	\$
Registration Fee:	\$
Includes meals? Includes lodging?	
Other:	\$
	\$
	\$
TOTAL COST	\$
What is your plan to pay for these expenses? Please list below:	
Amount received from NMSU (county budget or other expense account)\$	
Amount received from sources other than NMSU (this scholarship, personal, etc.)\$	
My signature verifies that I am a paid member of the NMACAA.	
Signature of applicant	
Date	

3. Finances: Describe in detail your estimated total cost of the event and how the funds will be spent (i.e.,

NOTE:

- --If approved by the NMACAA Foundation, funding is reimbursed by the Foundation after attending the function
- --Receipts for reimbursement must be submitted to the Foundation Treasurer within 60 days of returning from the function.