



222 New Road, Suite 700  
 Attention Doreen Gordon  
 Linwood, New Jersey 08221  
 Tel: 609-653-8700 Fax: 609-653-8751

**SCHOLARSHIP REQUEST FORM**

**This form should be completed for the awards won as a result of competing in a state or local pageant but are paid by MAO on their behalf. The completed form should be forwarded with all supporting documentation to your Executive Director for approval. Upon approval, the signed form and all required documentation will be forwarded by the director to the Miss America Organization National Office. Any forms without all required documentation cannot be forwarded to the Foundation for final approval and payment.**

**This form applies to the state and local scholarship awards listed below:**

State in which you received Award: _____	<u>Please check type of award:</u>
Local in which you received Award: (if applicable) _____	Academic _____
Year Awarded _____	Community Service _____
Your Name & Address: (Please Print Clearly) _____ _____	State CMN _____
Daytime Telephone # _____	Local CMN _____
	Academy of Honor _____
	Golf Tournament _____
	State Anniversary Grant _____
	State Matching Grant _____
	Miracle Maker Award _____
	<b>Email</b> _____
	SS# _____ - _____ - _____

**PLEASE COMPLETE APPROPRIATE SECTION PER STATE RULES AND REGULATIONS**

**I Tuition/Room & Board – must be paid directly to College/University**

Attached is a current detailed tuition statement from a College/University. For payment of room and board, tuition statement must show full-time status of 12-credit hrs. If living on campus, housing must show on the tuition statement. School address/or property rental address on where the payment is to be mailed should be clear.

Amount requested is \$ \_\_\_\_\_  
 .....

**II Part or all of your scholarship may be applied towards student loans – paid directly to lender**

Attached is a current bill from the lending institution,(bill must show payment address), copy of the promissory note(s) reflecting you are the primary or secondary payer of the loan, and official transcript which show the completion of the coursework.

Amount requested is \$ \_\_\_\_\_  
 .....

**I understand payment for this request may take at least three weeks** \_\_\_\_\_

**Approval of State Executive Director:** \_\_\_\_\_ **Signature of recipient**  
**Date:** \_\_\_\_\_

**Approval of Local Executive Director:** \_\_\_\_\_ **Date:** \_\_\_\_\_