

University Financial Aid and Scholarship Services

Scholarship Transmittal Form

Date:		Donor Information **Please note that if funds have to be returned, they will be returned to this address.						
Amount to be applied (please check the box beside	vill							
apply to and enter the amount to be applied to each term)			Organization:					
Fall 20 Spring 20	-	Contact Person:						
Summer 20\$			Address:					
Are student required to enroll full-time?								
☐ Yes	☐ Yes ☐ No				Phone:			
Additional Comments/Instructions			Email:					
			PLEASE CHECK if funds may be disbursed to student as a refund.					
Check Number:								
Last Name	First Name	Aggie ID#	Fall	Spring	Summer	Total Award		
			Amount	Amount	Amount			

Please make checks payable to: New Mexico State University

Please mail this form with the check(s) attached to: Financial Aid & Scholarship Services

MSC 5100

New Mexico State University

PO Box 30001

Las Cruces, NM 88003-8001

If you have any questions, contact the Financial Aid office at 575-646-4105.