

# Carlsbad Height Lions Club Scholarship

## Criteria:

- 3.0 cumulative GPA
- Enrolled at least half time at SENMC
- Degree seeking with no prior degrees
- US citizen, NM Resident who resides in Eddy County
- Returning adult or continuing student who did not attend college immediately following high school graduation, out of high school minimum two (2) years.
- Financial need to be taken into consideration, FAFSA must be completed prior to submission of application

## How to apply:

1. Complete scholarship application form and attach:
  - A paragraph describing, in detail, your educational goals, future plans, and how you plan to use the funds.
  - Academic transcripts of college work
2. Submit form and required documents to:

Southeast NM College, Attn: Jeannie Nichols  
Office of Financial Aid and VA  
1500 University Drive  
Carlsbad, NM 88220

**DEADLINE TO APPLY IS JULY 31<sup>st</sup>**

**Late and/or incomplete applications will not be considered.**

# CARLSBAD HEIGHTS LIONS CLUB SCHOLARSHIP APPLICATION FORM

**Application Deadline: July 31<sup>st</sup> Late applications will not be considered.** Submit form and required documents to: Southeast NM College, Financial Aid Office, Room 107, 1500 University Drive, Carlsbad NM 88220

Please indicate the semesters you plan to attend:  Fall (August)  Spring (January)

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ SENMC Student ID # \_\_\_\_\_

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Mailing address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Email address \_\_\_\_\_

Date of High School Graduation: \_\_\_\_\_ or Date of GED completion: \_\_\_\_\_

Have you completed the Free Application for Federal Student Aid (FAFSA) for the upcoming year?  YES  NO

(If yes, what is your EFC?) \_\_\_\_\_ Annual family income \$ \_\_\_\_\_

Please indicate any other scholarship or aid that you have been awarded for the upcoming academic year: (WIA, DVR, VA, PELL, etc.)

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List any previous college awards/honors and community service below:

**Please attach all college transcripts and a paragraph describing, in detail, your educational goals, future plans, and how you plan to use the funds.**

**Student Certification:** The above statements are true and correct to the best of my knowledge and I give consent to release the information concerning my academic and/or financial status to scholarship donors and scholarship selection committee members.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## TO BE COMPLETED BY SENMC FINANCIAL AID OFFICE

College major: \_\_\_\_\_ College hours completed/attempted: \_\_\_\_\_

Cumulative GPA (to date): \_\_\_\_\_ Anticipated graduation date: \_\_\_\_\_

Household size \_\_\_\_\_ Number in college \_\_\_\_\_ Number of hours enrolled: \_\_\_\_\_ Fall \_\_\_\_\_ Spring