

**NEW MEXICO STATE CHAPTER
P.E.O. SCHOLARSHIPS
Chapter Sponsor Information**

Mark the Scholarship(s) of your applicant

- | | |
|---|--|
| <input type="checkbox"/> Delilah Williams I <input type="checkbox"/> Delilah Williams II <input type="checkbox"/> Jean Boswell <input type="checkbox"/> NM State Scholarship <input type="checkbox"/> NM Career and Technical | <input type="checkbox"/> Francine Neff I <input type="checkbox"/> Francine Neff II <input type="checkbox"/> Francine Neff III <input type="checkbox"/> Francine Neff IV |
|---|--|

Personal Information about your applicant

Name _____
 Last First Middle Preferred Name

Address _____

City/State/Zip _____

Phone _____

Recommending Chapter Information

Name of P.E.O. Chapter Representative _____

Address _____

City/State/Zip _____

Chapter Letters _____

E mail (s) _____ Phone(s) _____

I certify that I have reviewed the information included in this application and that it is complete and correct.

Chapter Representative

Date