

**Request for Scholarship Payment
NHAEA SCHOLARSHIP PROGRAM**

For Office Use Only CHECK #: DATE:
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We are required as per our non-profit status by the Internal Revenue Service to keep accurate records. We ask that you provide proof of enrollment and/or receipt of payment in order for us to process your scholarship. Please attach documentation to this form and provide required information below.

NHAEA STUDENT SCHOLARSHIP (specify itemized purchase or coursework)

NHAEA TEACHER SCHOLARSHIP (specify itemized purchase or coursework)

NHAEA COLLEGE TUITION SCHOLARSHIP (specify college)

Total Scholarship Amount: \$ _____

Please specify who the check will be made out to and an address for mailing below.

Name & Address: _____

Submitted by: _____
(signature)

Mail this form with attached documentation to:
Lori Sweeney TREASURER NHAEA
17 Independence Lane
Manchester New Hampshire 03104
