



Scholarship Policy (formerly known as Financial Aid) Policy

It shall be the policy of the New Mexico Amateur Hockey Association (NMAHA) that, when available, scholarship funds will be accessible to those members of the association who demonstrate financial need and apply for it.

Procedure:

1. Applicant(s) shall complete and submit this scholarship application by **October 4th, 2023** (1st week of practices)
2. Print and complete this document, then scan/email and send to: nmahasecretary@gmail.com & CC nmahatreasurer@gmail.com
Can also email the NMAHA Secretary or Treasurer to arrange giving directly to either – or mail to:
NMAHA BOD c/o L. Tafuro, 544 Pyrite Dr NE, Rio Rancho, NM 87124
3. **Each application is reviewed by the NMAHA board of Directors and kept strictly confidential.** The NMAHA Treasurer will notify the applicant in writing as to the BOD's decision by **October 12th, 2023**
4. If approved for scholarship funds, each recipient/family is expected to volunteer time for the benefit of NMAHA – this will include completing the **USA Hockey background check process and the required SafeSport certification training** needed for select volunteering roles. There is no academic requirement, but the NMAHA BOD may request the athlete's report card mid-season.

Please review this form carefully and note the following:

- Completion of this application does not guarantee assistance.
- Scholarship funds will be awarded based on eligibility, application timeliness, and available funding
- Receipt of previous Scholarship (aka: Financial Aid) funds does not guarantee aid this season
- Any information found to be fraudulent will result in loss or denial of Scholarship funds

The following items should be submitted with this application:

1. Athlete/Family information (next page)
2. Financial information: Must submit previous year's tax returns of parents (both parents if divorced or separated) or primary guardian
3. Other items of consideration (i.e. medical condition(s), financial situation(s), dependent care, etc.)
4. Optional:
 - a. Written recommendation(s) by school representative, social worker, or another social services representative.
 - b. Essay from the player on why hockey is important to them.



Scholarship Funds Application

Please complete this form for each child requesting Scholarship funds.

Athlete/Family Information

Athlete's Name: _____ Age: ____ Birth Date: _____

Address: _____

City: _____ State: _____ Zip: _____

School Athlete Attends: _____ Grade: _____

Athlete lives with: () Both parents () Mother () Father () Other: _____

Siblings playing this season: () Yes () No If Yes, Name(s)/Level(s): _____

Amount of award requested:

Full (50% of registration cost) \$ _____ Partial (<50%) %: _____ \$ _____

Parent/Guardian Information:

Total Household Annual Income: \$ _____ Own Home: () Yes () No

Income from other sources: Type: _____ Amount: _____

Type: _____ Amount: _____

Father/Guardian Name: _____ Occupation: _____

Phone: _____ E-Mail: _____

Mother/Guardian Name: _____ Occupation: _____

Phone: _____ E-Mail: _____

Has the athlete ever received NMAHA Scholarship Funds (formerly called Financial Aid)? () Yes () No

Other items of consideration: (attached additional sheets if necessary)

This application will not be considered complete without last year's tax information.

I certify that all the information on this form is true and correct. I understand the information contained on this form is considered privileged and will be held in strict confidence. I further authorize the NMAHA Board Of Directors (BOD) to make whatever inquiries deemed necessary to verify the information provided.

Parent/Guardian Signature: : _____ Date: _____

NMAHA Use Only

Application Received by: _____ Date: _____

Date BOD reviewed: _____ Awarded: ()Yes ()No Amount: _____

Name of Parent/Guardian notified: _____ Date: _____

Treasurer Signature: _____ Date: _____