

**NEW MEXICO YOUTH TENNIS FOUNDATION  
ADULT SCHOLARSHIP REQUEST**

**APPLICATION INFORMATION:**

**DATE** \_\_\_\_\_

**Name** \_\_\_\_\_

**USTA #** \_\_\_\_\_

**Social Security #** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Telephone** \_\_\_\_\_ **E-mail address** \_\_\_\_\_

**Program(s) in which applicant is involved:** \_\_\_\_\_

**PURPOSE FOR FUNDING REQUEST (MUST RELATE TO PURPOSE OF NMYTF OR TO JUNIOR TENNIS PROGRAM(S) WITH WHICH APPLICANT IS INVOLVED):**

Program Tuition (if applicable) \_\_\_\_\_ Travel Expense \_\_\_\_\_

Other \_\_\_\_\_

**JUSTIFICATION FOR NEED:** *(Include details of expected expense. Use reverse side or attach separate sheet, if necessary)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FUNDING SOURCES:**

USTA DISTRICT \_\_\_\_\_

Local financial support \_\_\_\_\_

Personal funds \_\_\_\_\_

Other funds \_\_\_\_\_

**TOTAL EXPECTED EXPENSES:** \_\_\_\_\_

**SCHOLARSHIP AMOUNT REQUESTED:** \_\_\_\_\_

**APPLICANT SIGNATURE:** \_\_\_\_\_

*I understand that I must give 2 hours of volunteer service to my local Tennis Team/USTA District per \$50 received. All activities must be approved by scholarship committee.*

If applicant has received a prior scholarship, have service hours been completed? \_\_\_\_\_

**USTA DISTRICT OFFICER SIGNATURE:** \_\_\_\_\_

Title and Date: \_\_\_\_\_

**SEND REQUEST TO:**

**New Mexico Youth Tennis Foundation  
PO Box 93605  
Albuquerque, NM 87199-3605  
nmytf@comcast.net**