

Michael and Enokena Olson Memorial Scholarship Application

PERSONAL INFORM	ATION		
LAST NAME:		FIRST N	IAME:
TRIBAL AFFILIATION:			
STREET ADDRESS:			
CITY:			
STATE:		ZIP COD	DE:
EMAIL ADDRESS:			NUMBER:
UNIVERSITY OF NEW	W MEXICO INFORMATION		
Banner ID			
Major			Minor
Select One	Undergraduate		Year in Program:

Select all

that apply

Transfer Student

Returning Student

Graduate Student

Non-Traditional Student

Parent Student

Graduate Student

Yes

No

Do you have

Financial Need?

In 250 words,	Please describe how this scholarship will impact your financial need.	
In 250 words,	Please describe how the library has impacted your academic progress.	
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To apply please bring your application packet to the INLP Office, Zimmerman #227 (2nd floor Zimmerman Library) or email it to inlp@unm.edu before the Friday after Fall Break or Spring Break no later than 12 pm.

Your application packet should include the following:

- Copy of Certificate of Indian Blood
- Document indicating full-time enrollment
- One letter of Reference from either a UNM Faculty or Staff
- Application Form

Additional requirement:

• Awardees must give a presentation on the financial impact of this award to their academic progress and development

If you have any questions, please contact INLP at inlp@unm.edu or 505.277.7433

SIGNATURE:	DATE:	