



Miss Miami Gardens
Scholarship Pageant

REQUEST FOR DISBURSEMENT OF MISS MIAMI GARDENS PAGEANT SCHOLARSHIP AWARD

I, (FULL NAME) _____ Social Security No. _____

Who participated in the 200_____ Miss Miami Gardens Scholarship Pageant, was awarded scholarship(s) totaling \$_____ during participation in the pageant for the following award(s):

List the name and amount of each award that totals the above amount

I am registered as a full-time at: ____ Undergraduate ____ Technical ____ Graduate

(Name of Institution)

I now request disbursement of the scholarship awarded in the pageant. I have read and understand all of the "MMG Scholarship Guidelines and Regulations". Enclosed in this packet is the following OR an explanation if NOT ENCLOSED (i.e. if being mailed under separate cover from another source)"

- Original Certificate of Registration from the school.
- Copy of Current Tuition or Student Loan Invoice showing your account number.

CURRENT PHONE NUMBER WITH AREA CODE: _____

CURRENT E-MAIL ADDRESS: _____

CURRENT MAILING ADDRESS: _____

Number of Semesters until Graduation: _____

Name of School or Student Loan Services: _____

Address: _____

City: _____ State: _____ Zip: _____

Contestant's Signature: _____

Date: _____