



## **NMBio Sponsors Scholarship in Biomedical/Biotech Field**

February 23, 2015 –The New Mexico Biotechnology & Biomedical Association (NMBio) is offering a \$1,000 Scholarship to be presented to a New Mexico high school senior graduating in Spring of 2015. The student receiving the scholarship must meet the following criteria:

- 1.) be a U.S. citizen or permanent U.S. resident with a green card
- 2.) be a legal New Mexico resident for a minimum of one year
- 3.) be graduating from an accredited public or private high school
- 4.) be accepted to a two- or four-year accredited New Mexico college, and
- 5.) plan to major as a full-time student in an area that will lead to a career in a biotechnology or biomedical field

To apply, use the form on the reverse side and include: a one-page letter of intent in which the student describes his/her biomedical or biotechnology career goals. Also include documentation of acceptance to the New Mexico college, an official copy of the high school transcripts, a current teacher letter of recommendation, and SAT or ACT scores.

Apply by June 1, 2015 to: [admin@nmbio.org](mailto:admin@nmbio.org)

or mail to: NMBio Scholarship  
P.O. Box 80233  
Albuquerque NM 87198-0233

**This application form is for the high school senior graduating in the spring of 2015 to apply for the NMBio scholarship for the 2015-16 college/university academic school year.**

**Personal information:**

Name: \_\_\_\_\_

Permanent mailing address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip \_\_\_\_\_

Name of parent(s) or nearest relative: \_\_\_\_\_

Current mailing address (if different from above): \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_

Permanent Phone Number: \_\_\_\_\_

Current Phone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Gender:  Female  Male

Are you a U.S. Citizen?:  Yes  No If no, what is your green card number?

\_\_\_\_\_

How long have you been a legal New Mexico resident?: \_\_\_\_\_

List three professions or occupations you have seriously considered: \_\_\_\_\_

**Educational information:**

High School: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip \_\_\_\_\_

Principal: \_\_\_\_\_ Phone Number: \_\_\_\_\_

GPA (through 7<sup>th</sup> semester): \_\_\_\_\_

Name of High School Counselor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name the ONE college/university you will attend: \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Name Printed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Name Printed

\_\_\_\_\_  
Date

I (we) certify that all of the information on this form is true and complete to the best of my (our) knowledge...