



**LIST THREE (3) REFERENCES:**

NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

I HEREBY CERTIFY ALL OF THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND THAT IF I SHOULD RECEIVE A NMPS EDUCATION FOUNDATION SCHOLARSHIP, THE MONIES WILL BE USED TOWARDS MY TUITION, FEES OR BOOKS.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_