

# Request for scholarship payment

Name \_\_\_\_\_

Member number \_\_\_\_\_

Type of scholarship (mark which scholarship you have been awarded)

\_\_\_\_\_ **NCHA Charities Foundation - Cutter's In Action (CIA)**  
(Include previous semester's grades and a copy of your class schedule for the current semester)

\_\_\_\_\_ **NYCHA cutting scholarship**  
(Include class schedule for current semester and a copy of invoice or statement showing total fees due)

\_\_\_\_\_ **NCHA Affiliate cutting scholarship**  
(Include class schedule for current semester and a copy of invoice or statement showing total fees due)

\_\_\_\_\_ **NYCHA/Walton Family Foundation**  
(Include previous semester's grades and a copy of your class schedule for the current semester)

\_\_\_\_\_ **Whitney Welch Sportsmanship Award & Scholarship**  
(Include class schedule for current semester and a copy of invoice or statement showing total fees due)

**Name and address of college/university where payment should be mailed:**

College \_\_\_\_\_

Department \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Amount to be paid by NCHA \_\_\_\_\_

Date due \_\_\_\_\_

Student ID number \_\_\_\_\_

## **Student information**

Your phone number \_\_\_\_\_

Your email address \_\_\_\_\_

If your mailing address has changed, please provide the new address

\_\_\_\_\_

\_\_\_\_\_

Mail to: The Youth Department, NCHA, 260 Bailey Avenue, Ft. Worth, TX 76107  
or fax to: 817.244.2015