



**Municipal Officials Leadership Institute**  
*New Mexico Municipal League*

P. O. Box 846 Santa Fe, NM 87504 800-432-2036

**APPLICATION FOR SCHOLARSHIP**

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

MUNICIPALITY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

Please answer the following questions and sign below:

1. Are you an elected municipal official in the state of New Mexico? \_\_\_\_\_  
What office do you hold? \_\_\_\_\_
2. What is the annual general fund budget for your municipality? \_\_\_\_\_
3. How much is budgeted for governing body training and travel? \_\_\_\_\_
4. Have you ever received a scholarship (or scholarships) from the New Mexico Municipal League? \_\_\_\_\_ If yes, what was the amount you were awarded and when? \_\_\_\_\_
5. Have you attended other MOLI sessions? \_\_\_\_\_
6. Additional comments (anything that is pertinent to your selection for a scholarship) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Which MOLI session would you like to attend with this scholarship? \_\_\_\_\_

**BE SURE TO ATTACH THE NARRATIVE AND OTHER WRITTEN DOCUMENTS AS SPECIFIED IN THE SCHOLARSHIP ELIGIBILITY REQUIREMENTS.**

I understand that the scholarship covers the registration fee of the institute. I will be responsible for my own transportation, lodging and meals not provided as part of the program.

*Signature* \_\_\_\_\_