

KIT CARSON ELECTRIC EDUCATION FOUNDATION  
P.O. BOX 578, TAOS, NM 87571  
575-758-2258 – FAX (575)758-4890

2020 KIT CARSON ELECTRIC EDUCATION FOUNDATION  
SCHOLARSHIP FUND

A one-time scholarship available to High School seniors, to be paid to the recipient at the start of the Fall College semester.

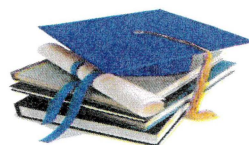
Eligibility

1. Available to qualified students who attend either a public or private school and whose parents are members of the Kit Carson Electric Cooperative, Inc. and reside within the service area of the Cooperative. A “public or private school” includes a public, charter, Christian or parochial school or a student who has successfully completed a home-school program.
2. Scholarships are to be granted to attend a recognized and accredited institution of higher education.
3. Applicant must be of good character as evidenced by at least one (1) letter of recommendation from teachers, principals, counselors, etc. from the schools they are currently attending.
4. Applicant must make his/her arrangements for an official transcript of school record to be provided to the Kit Carson Electric Education Foundation, Inc. by the high school.
5. Applicant must demonstrate a coherent degree plan and willingness to pursue a course of higher learning.
6. Applications must be postmarked no later than April 9, 2020. If any of the documentation requested is not provided by the deadline date your application will be denied. Awards will be announced within thirty (30) days of the deadline date.
7. Applicant must provide an original class schedule from the college or school they will be attending to Joyce Archuleta, Executive Secretary of Kit Carson Electric Cooperative, Inc. for verification before monies will be disbursed.

DIRECTORS

STEVE ARCHULETA  
FRANKILIN FERNANDEZ, JR  
DANETTE RAEI

THOMAS TAFOYA  
JUSTIN TORRES



**SCHOLARSHIP APPLICATION FORM**  
**Kit Carson Electric Education Foundation**  
**P.O. Box 578, Taos, NM 87571**

Name of Applicant \_\_\_\_\_ Telephone \_\_\_\_\_

Address (Mailing) \_\_\_\_\_

Address (Physical) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Are your parents or legal guardian receiving electrical service from Kit Carson Electric? (If legal guardian proof of guardianship must be provided)

Yes \_\_\_\_ No \_\_\_\_

If you answered yes, what is the name and membership # in which your parent's electric account is listed? Name \_\_\_\_\_  
Member # \_\_\_\_\_

In what field do you plan to Major? \_\_\_\_\_ Minor? \_\_\_\_\_

Have you been accepted? \_\_\_\_\_ By which college(s) or University (ies)

\_\_\_\_\_  
\_\_\_\_\_

Have you received any other scholarships or grants? (Circle one) Yes or No.

High School Attended:

Academic Honors Received:

School-sponsored Clubs and Activities:

Work Experience: List employer, address, and length of time employed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IN APPROXIMATELY 150 WORDS, WRITE WHY YOU CHOSE THE FIELD YOU PLAN TO MAJOR AND WHAT YOU PLAN TO DO ONCE YOU COMPLETE YOUR EDUCATION. (ATTACH A SEPARATE SHEET OF PAPER).**

**APPLICANT MUST MAKE HIS/HER ARRANGEMENTS FOR AN OFFICIAL TRANSCRIPT OF SCHOOL RECORD TO BE PROVIDED TO THE KIT CARSON ELECTRIC EDUCATION FOUNDATION BY THE HIGH SCHOOL.**

**ALL SCHOLARSHIPS THAT ARE AWARDED ARE VALID FOR ONE YEAR ONLY FROM THE DATE OF APPROVAL. IN CERTAIN CIRCUMSTANCES EXTENSIONS MAY BE GRANTED. A LETTER REQUESTING AN EXTENSION MAY BE SUBMITTED TO THE FOUNDATION BOARD FOR REVIEW.**

I agree to permit the review of this Application and my school records by anyone representing the Kit Carson Electric Education Foundation.

Enclosed is one letter of recommendation from guidance counselors, principals, the superintendent or teachers from the high school I currently attend and an official transcript from the high school from which I will graduate from this year.

Send Applications to:      Kit Carson Electric Foundation  
   Scholarship Fund  
   P.O. Box 578  
   Taos, NM 87571

Date: \_\_\_\_\_  
   Signature of Applicant

Date: \_\_\_\_\_  
   Signature of Parent or Guardian