**Statement of Accuracy**

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be used for any purpose deemed necessary to promote this scholarship program.

Signature of scholarship applicant:

Date:

I, , certify that I have reviewed the application packet

  *(Please Type or Print)*

and all items are complete to the best of my knowledge.

Signature of Title III Administrator (Project Director):

Date:

**REMEMBER**

* The deadline for the application to be received is **Friday, September 3, 2021.**
* The completed application packet must be emailed to nahbcut3ascholarship@gmail.com.