**MCHS Class of 1977 Scholarship Application**

**(Return Application to Counseling Office by April 12, 2019)**

**\*\*Please type your information (DO NOT STAPLE PAPERS)**

**Make sure your last name is on every page that you submit.**

**Name**:

(List first, middle, and last name)

Address:

Telephone Number:

**Post Secondary Plans**

I have applied to the following College/University/Technical College:

I have been accepted to college:

(Attach acceptance letter if available)

My Major(s) in college will be:

Have you participated in Dual Enrollment? \_\_\_\_Yes \_\_\_\_No List Number of Credits Earned\_\_\_\_\_\_\_

**I give my permission to release information contained in this document to parties interested in awarding a scholarship to my son/daughter/self.**

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PARENT SIGNATURE DATE STUDENT SIGNATURE DATE

**TEST SCORES** SAT Verbal \_\_\_\_\_\_ SAT Math\_\_\_\_\_\_ SAT Writing \_\_\_\_\_\_ ACT Composite: \_\_\_\_\_\_

**Cumulative Grade Point Average (unweighted)**: *4.0 Scale*\_\_\_\_\_\_\_\_\_\_\_

Complete the sections below and attach sheet if additional space is needed; **must be typed**.

**Extra-Curricular Participation**

**Memberships in Organizations** (Indicate offices held & years of participation.)

**Honors and Recognitions Received**

**Community Service Activities**

**Include a statement describing how a local scholarship (regardless of the amount) will help you achieve your goal.**

**Optional Financial Need Assessment**: (This will be handled as strictly confidential information. Also, only those scholarships requesting financial need information will be provided this information.)

Please list any scholarships you have been awarded and their amounts. Also, indicate whether they are renewable in following years. You do not need to include the HOPE Scholarship/Grant.

Number of family members residing in household: Number attending college:

Annual Cost of all those attending college (including this student):

Include other factors which influence financial need. (You may include any information you wish that will help the selection committee determine the extent of your financial need. You may attach a letter if needed.)

Do you plan to work while attending college?

Will you be taking out a student loan?

What is one mistake you made in the last four years and what did you learn from it?

Essay: Who has influenced your decision to further your education and why? (Please type on separate page and attach to this application)

**Father’s Name**:

Father’s Place of Employment:

Daytime Phone Number:

**Mother’s Name:**

Mother’s Place of Employment:

Daytime Phone Number:

Please list any organizations that your parents are members of or affiliated with including Georgia Farm Bureau, Murray Association of Educators, Murray Alumni Association, Spring Place Ruritan Club, etc.:

(COUNSELOR WILL ATTACH A TRANSCRIPT)