Mecklenburg Scholarship Association Darlene Antonette Heble Scholarship

(Trust Fund Established for Mecklenburg County, VA Students)

Scholarship Mission Statement:

To help deserving Mecklenburg County students who are of **good** character and who are in **need** of financial assistance to defray the cost of tuition and mandatory fees to achieve their educational goals at a four-year university or college.

Postmarked/Deadline Date: Monday, April 20, 2020. No exceptions to deadline! Applications received or postmarked after the deadline date will not be reviewed by the Selection Committee and the applicant will be ineligible for an award. Applications received prior to the deadline date will be processed in the order received.

Completed applications are to be mailed to:

Dottie Dean Bratton, President Mecklenburg Scholarship Association 912 West Sycamore Street Chase City, Virginia 23924

Applicant Checklist: Completed Applications Include the Following:

- 1. Letters of Recommendation
 - A. <u>Teacher Recommendation</u> from a faculty member within the school the applicant is presently attending and who has <u>not</u> previously written a recommendation for the applicant.
 - B. <u>Community Representative Recommendation</u> from a person who has <u>not</u> previously written a recommendation for the applicant.
- 2. Letter of Acceptance from your chosen four-year college/university.
- 3. Official, <u>Sealed</u> Academic Transcript from your college/university's Office of the Registrar or your high school Guidance Counselor's Office. Unofficial transcripts are not acceptable.

^{*}Applicants will be notified by mail <u>if awarded</u> a scholarship by the Selection Committee of the Mecklenburg Scholarship Association.

Selection Committee's Guidelines for Awarding Scholarships

- 1. Completed applications must be postmarked no later than April 20th or in the possession of the President of the Mecklenburg Scholarship Association. Applications received after this date will not be reviewed by the Selection Committee and the applicant will be ineligible for an award.
- 2. If an item on the application is left blank or if a page is deleted from the application, the student is required to explain the reason for the omission. If no explanation is given, the applicant will be ineligible for a scholarship award.
- 3. If applicants do not include a letter of acceptance to their chosen college or university and an official, sealed transcript from their college Registrar's Office or high school Guidance Counselor's Office, the application will be eliminated from consideration.
- 4. In addition to the applicant's home mailing address, the home school district of the applicant is also required to determine residency within Mecklenburg County, VA, and thus, determine the eligibility of the applicant.
- 5. A student holding a part-time job will be considered as a positive factor in determining scholarship awards.
- 6. Applicants with parents who earn higher incomes will be considered on a limited basis.
- 7. Since this scholarship is based on a student's character, the Selectin Committee requires trustworthy and truthful information on the application from the applicant. The applicant's signature is required under the pledge.
- 8. Scholarship awards are non-transferable from one college to another college. If a student does not enroll in the school stated on the scholarship application, the scholarship award is forfeited.
- 9. Applicants who are reapplying for a scholarship must seek letters of recommendation from individuals who have not written previous recommendations for the applicant. This includes a faculty member within the school the applicant is presently attending as well as the community representative.
- 10. Master's degree applicants, students over the age of 26 years, and all scholarship amounts will be determined with consideration for the cost of tuition, mandatory fees, funding availability and the number of applications received.

If awarded a scholarship, you will receive a "Verification of College for Distribution of Scholarship Awards" form to complete that will be included with your scholarship letter. You will need to give your Student ID number, the Registrar's name and the Registrar's office address so that your scholarship amount can be sent directly to your school by July 1. Failure to return the completed form by the deadline date stated on your verification sheet will forfeit your scholarship. Your scholarship amount will be divided with half of the amount for the Fall Semester and the other half of the amount for the Spring Semester.

Student Information

Legal Name:		
Home Address:		
Email Address: (Please print legibly. The applicant will be commail address is available, please submit a print and address is available.	contacted if there is a question that needs an explanation. If no shone number where you can be reached.)	
Circle your Home School Dis	trict: 1 2 3 4 5 6 7 8 9	
High School or College Prese	ntly Attending:	
College Acceptance Letter: Include letter with this application.	clude a copy of your college or university acceptance	
, "	y fees for the school you will be attending:	
(<u>Do not</u> in	clude room and board, meal plans, or textbook/class expenses.)	
	and the Amount Received:	
Job: Employer:	Amount Earned:	
Child Support:	Amount Received:	
Social Security Administration:	Amount Received:	
Department of Social Services:	Amount Received:	
Other: Source:	Amount Received:	
Do you presently receive or he Presently receiving:	ave you applied for financial aid? Amount awarded: Title of Financial Aid:	
Will apply or have applied:	Title of Financial Aid:	
Future Plans: (Write on the back	of this sheet if additional space is needed.)	

Letters of Recommendation: (Enclose both letters with this application.)

- 1. Teacher Recommendation from a faculty member within the school presently attending and who has not previously written a letter of reference for the applicant.
- 2. Recommendation from a Community Representative who has not previously written a letter of reference for the applicant.

Academic Transcript: Enclose a copy of your official, sealed transcript from your college/university's Office of the Registrar or your high school Guidance Counselor's Office. Unofficial transcripts are <u>not</u> acceptable.

Applicant: If you are financially independent of your parents/guardians, give an explanation on the back of this sheet. Financially independent means that your parents/guardians do not financially support you with <u>any of your daily expenses</u> such as rent, food, clothing, educational expenses, transportation, etc.)

Parents/Guardian Information

Total Number of persons r		
Marital Status: SingleM		
Number of children presen	itly enrolled in colleg	ge:
Father's Name:		***************************************
Place of Employment:		
1040 Tax Form/Adjusted (Gross Income:	
Other Sources of Income a		
Part-time Job:	Amount Received:	
Social Security Administration:	Amount Received:	
Department of Social Services:	Amount Received:	
Retirement Benefits:	Amount Received:	
Other: (Unemployment benefits, Re	ental property income, Farm	subsidies, etc.)
Mothav's Name		
Mother's Name:		23.4m. d
Place of Employment:		
1040 Tax Form/Adjusted G	Gross Income:	
Other Sources of Income:		
Part-time Job:	Amount Received:	
Social Security Administration:	Amount Received:	
Department of Social Services:	Amount Received:	
Retirement Benefits:	Amount Received:	
Other Income: (Unemployment benef	fits, Rental property income, F	arm subsidies, etc.)
Total Family Income:		
Additional Comments: Are t	here any unusual personal or f	amily circumstances for this
committee to consider? Continue on the	back of this sheet if more spa-	ce is needed.
Diadea (gr		
Pledge: (Signature is required		
application is trustworthy and t	ruthful to the best of m	y knowledge.
Parant Signature if applicable	<u> </u>	Candont Cianata
Parent Signature, if applicable		Student Signature