

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: Friday, April 16, 2021. 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. Guidance counselors/college registrars are not responsible for mailing applications.

Completed applications are to be mailed to:

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

Selection Committee's Guidelines for Awarding Scholarships

1. Completed applications must be postmarked no later than April 16th 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 a question on the application is left unanswered 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. The applicant's home mailing address is required to determine residency within Mecklenburg County, VA, and thus, to 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.
11. The President of the Mecklenburg Scholarship Association does not participate in the selection of the scholarship recipients or vote for any candidate applying for either of the three scholarship programs (Pritchett, Carter, Heble) offered. Scholarship recipients are determined solely by the Selection Committee.

Student Information

Student's Legal Name: _____

Home Address: _____

Date of Birth: _____

Email Address: _____

Student Phone #: _____

(The applicant will be contacted if there is a question that needs an explanation.)

School Presently Attending: _____

(Include an official, sealed Academic Transcript for the school.)

Your College/University Choice: _____

(Include a copy of your college or university acceptance letter.)

Cost of tuition and mandatory fees for the school you will be attending:

_____ (Do not include room and board, meal plans, or textbook/class expenses.)

What is your desired course of study and your future plans? _____

Student Income and the Amount Earned/Received:

Job Employer: _____ Amount Earned: _____
Child Support: _____ Amount Received: _____
Social Security Administration: _____ Amount Received: _____
Department of Social Services: _____ Amount Received: _____
Other Sources: _____ Amount Received: _____
If employed, does your employer contribute to your educational expenses? _____
If yes, what amount do you receive? _____

Do you presently receive or have you applied or will you apply for financial aid?

Presently receiving: _____ Amount awarded: _____
Will apply or have applied: _____ Title of Financial Aid: _____

Letters of Recommendation:

- 1. **Professor/Teacher** who is associated with the school where the student is presently attending and who has not previously written a recommendation for the applicant.
- 2. **Community representative** from a person who has not previously written a recommendation for the applicant.

Parents'/Guardians' Information

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 any of your daily expenses such as rent, food, clothing, educational expenses, transportation, etc.)

Number of dependents claimed on your most current tax return: _____

Marital Status: Single ___ Married ___ Separated ___ Divorced ___ Widowed ___

Number of children presently enrolled in college: _____

Father's/Legal Guardian's Name: _____

Place of Employment: _____

Adjusted Gross Income on your most current tax return: _____

(AGI is located on: Line 37/Form 1040; Line 21/Form 1040A; Line 4/Form 1040EZ; No return filed)

Other Sources of Income and Amount Earned/Received:

Part-time Job: _____ Amount Earned: _____
Social Security Administration: _____ Amount Received: _____
Department of Social Services: _____ Amount Received: _____
Retirement Benefits: _____ Amount Received: _____
Other: (Unemployment benefits, Rental property income, Farm subsidies, etc.) _____

Mother's/Legal Guardian's Name: _____

Place of Employment: _____

Adjusted Gross Income on your most current tax return: _____

(AGI is located on: Line 37/Form 1040; Line 21/Form 1040A; Line 4/Form 1040EZ; No return filed)

Other Sources of Income and the Amount Earned/Received:

Part-time Job: Amount Received: _____

Social Security Administration: Amount Received: _____

Department of Social Services: Amount Received: _____

Retirement Benefits: Amount Received: _____

Other Income: (Unemployment benefits, Rental property income, Farm subsidies, etc.) _____

Total Family Income: _____

Additional Comments: Are there any unusual personal or family circumstances for this committee to consider? Continue on the back of this sheet if more space is needed.

Pledge: (Signature is required from applicant)

The information given on this application is trustworthy and truthful to the best of my knowledge.

Parent/Guardian Signature

Student Signature

***Applicants will be notified by mail if awarded a scholarship.**

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, your 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.

This scholarship is valid for the 2021-2022 academic school year. Although the Mecklenburg Scholarship Association administers three separate scholarship programs (Pritchett, Carter Medical, Heble), only one scholarship per applicant will be awarded. Therefore, applicants are encouraged to select the scholarship program that best describes their eligibility.