

\$10,000 SCHOLARSHIP TO ITAWAMBA COMMUNITY COLLEGE

Phillip Neal Jones
Memorial Scholarship Fund
APPLICATION

Name _____ Sex _____

Mailing Address _____ Telephone # _____

High School Attended _____

City - State - Zip Code _____

Names of Parents or Guardians _____

Father's Occupation _____

Mother's Occupation _____

Number of Children Living at Home _____

Number of Children Attending College _____

Is outside financial assistance necessary to begin and complete a two-year education?
_____ Yes _____ No

If "yes", please explain: _____

Will you be enrolled as a full-time student? _____ Yes _____ No

If "no", please explain plans: _____

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Please list three (2) personal references (provide names, addresses, telephone number):

1. _____
2. _____

High School Grade Point Average: _____ ACT Score: _____

Class Rank: _____ SAT Score*: _____ Verbal*: _____ Math*: _____

* - IF AVAILABLE

INCLUDE WITH THIS APPLICATION:

1. Essay's entitled, "*What receiving the Phil Jones Memorial Scholarship will mean to me*"
"*A biography of my life and goals*" (250 words or less).
2. Two letters of recommendation from teachers.

Please return your application to your school guidance counselor by March 10, 2023.

The scholarship will be awarded based on the following:

1. **Must achieve creditable results on ACT or SAT;**
2. **Must show evidence of financial need;**
3. **Must be a good citizen**
4. **Must attend ICC.**