

# Owen B. Whitehurst Memorial Scholarship Application

**Eligibility requirement:**

- Student must be a graduating senior of one of the four high schools in Alcorn County
- Based on Scholarship, Leadership, and Financial Need

Please return application to your high school counselor no later than March 8, 2024

Name	_____	Phone	_____
Street Address	_____	Email	_____
City, State, Zip	_____	Place of Birth	_____
Date of Birth	_____	Sex	_____
Age	_____		

(Resident alien status does NOT qualify. Applicant must be a citizen on the date the application is signed.)

Are you an American citizen?  Yes  No

If you were not born an American citizen, but are a naturalized American citizen, give date, place (Office or Court) and Naturalization Number.

Date \_\_\_\_\_ Place \_\_\_\_\_ Number \_\_\_\_\_

If you were not born in the United States, but are a citizen by birth, please explain circumstances.

\_\_\_\_\_  
\_\_\_\_\_

By signing this application you agree, if asked, to provide information that will verify the accuracy of your completed form. This information may include a copy of your U.S. or state income tax form. If you purposely give false or misleading information, you will be disqualified from this scholarship. You agree to the use of your name, and any information contained within the application for advertising, promotional, and publicity purposes without consent or compensation.

Date \_\_\_\_\_ Signed by: \_\_\_\_\_ (Student)

Date \_\_\_\_\_ Signed by: \_\_\_\_\_ (Mother/Guardian)

Date \_\_\_\_\_ Signed by: \_\_\_\_\_ (Father/Guardian)

**School attended (9<sup>th</sup> through 12<sup>th</sup> grades)**

Name of school \_\_\_\_\_ Dates attended \_\_\_\_\_

Does school offer honors courses?  Yes  No Did you participate?  Yes  No

Does school offer advanced placement courses?  Yes  No Did you participate?  Yes  No

Name of school \_\_\_\_\_ Dates attended \_\_\_\_\_

Does school offer honors courses?  Yes  No Did you participate?  Yes  No

Does school offer advanced placement courses?  Yes  No Did you participate?  Yes  No

Graduation date \_\_\_\_\_ Class Rank \_\_\_\_\_ Number of students in class \_\_\_\_\_

Best ACT score \_\_\_\_\_ Best combined SAT score \_\_\_\_\_

# Owen B. Whitehurst Memorial Scholarship Application

## *Honors and Awards*

Include scholastic, extracurricular, and civic honors, and awards during grades 9 through 12. State the nature of the award and grade won (i.e. Girl Scout Gold Award – 12). Please do not abbreviate names of awards.

1.		9.	
2.		10.	
3.		11.	
4.		12.	
5.		13.	
6.		14.	
7.		15.	
8.		16.	

## *Positions of Leadership*

State name of organization, position, and grade(s) position was held, starting with the most recent (i.e. Key Club, President – 11).

1.		5.	
2.		6.	
3.		7.	
4.		8.	

## *Activities and Organizations*

Include all scholastic, extracurricular, and civic organizations that you participated in during grades 9 to 12, even those listed in the Positions of Leadership section (i.e. Pep Club – 12).

1.		7.	
2.		8.	
3.		9.	
4.		10.	
5.		11.	
6.		12.	

# Owen B. Whitehurst Memorial Scholarship Application

## *Community Service*

List volunteer work or community service you performed without pay from 2021 – 2024.

Organization	Dates of Participation	Type of Work	Total Hours

## *Employment*

List the jobs you have held from 2021-2024.

Include work on a family farm or for a family business, even if not paid. Please list total hours worked, not average hours per week.

Employer	Dates of Employment	Type of Work	Total Hours

## *College Plans*

State your plans for enrollment in an accredited American college or university. Include your planned major (please keep in mind that any scholarship money awarded will be sent directly to your chosen college and placed in your account).

---

---

---

---

Have you been given other scholarship aid?  Yes  No

If yes, give details: \_\_\_\_\_

Do you intend to apply for financial aid at the college you plan to attend?  Yes  No

If yes, give details: \_\_\_\_\_

---

