

Clay Waycaster Memorial Scholarship Fund
APPLICATION

Name _____ Sex _____

Street Address _____ Telephone _____

City- State – Zip _____

Name of Parents or Guardians _____

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

If “no”, please explain plans: _____

Please list three (3) personal references (provide names, addresses, telephone number)

1. _____

2. _____

3. _____

Give names of colleges to which you have applied: _____

High School Grade Point Average: _____ ACT score: _____

1. Attach a list of all extracurricular activities during your high school career, both in school and out of school.
2. Write a paragraph entitled “*Why a College Education is Important to Me*”.
3. Submit a letter of recommendation from a teacher.

**PLEASE RETURN YOUR APPLICATION TO THE TUPELO HIGH
SCHOOL COUNSELOR’S OFFICE BY MARCH 7, 2025.**