



**SMCC FOUNDATION SCHOLARSHIP  
APPLICATION**  
**Deadline for Submission is March 15th**

Please return this application, along with ALL required information to:  
Leanne Andrews, Director, SMCC Foundation, 1156 College Drive, Summit, MS 39666 or [landrews@smcc.edu](mailto:landrews@smcc.edu).  
ALL required information must be attached to application at the time of submission, details below.  
Applications will not be accepted after the deadline for submission.

Academic Year for which you are applying: \_\_\_\_\_

|                                                                                |                                                 |                               |                                               |                                                   |
|--------------------------------------------------------------------------------|-------------------------------------------------|-------------------------------|-----------------------------------------------|---------------------------------------------------|
| Last Name                                                                      | First                                           | Middle                        | Preferred Name                                |                                                   |
| Home Mailing Address                                                           | City                                            | State                         | Zip                                           | County                                            |
| Email                                                                          | Phone Number                                    | Last 4 SSN                    | SMCC Student ID #                             |                                                   |
| Birth Date (mm/dd/yyyy)                                                        | Place of Employment                             |                               |                                               |                                                   |
| Mother's Name                                                                  | Employer                                        |                               |                                               |                                                   |
| Father's Name                                                                  | Employer                                        |                               |                                               |                                                   |
| ACT Score                                                                      | Planned Major                                   | Current GPA                   | <input type="checkbox"/> General Academic     | <input type="checkbox"/> Career Technical Program |
| Freshman <input type="checkbox"/>                                              | Sophomore or Returning <input type="checkbox"/> |                               | <input type="checkbox"/> ADN Program          | <input type="checkbox"/> LPN Program              |
| High School                                                                    | Address                                         | Graduation Date               | GPA                                           |                                                   |
| College Attended (if applicable)                                               | Address                                         | Graduation Date               | GPA                                           |                                                   |
| Are you a member of the SMCC Choir, Stageband or Band?                         | <input type="checkbox"/> YES                    | <input type="checkbox"/> NO   | If so, which instrument do you play?<br>_____ |                                                   |
| Are you interested in sports?                                                  | <input type="checkbox"/> YES                    | <input type="checkbox"/> NO   | _____                                         |                                                   |
| Are you a player of an athletic program at SMCC?                               | <input type="checkbox"/> YES                    | <input type="checkbox"/> NO   | If so, which SMCC program?<br>_____           |                                                   |
| While at Southwest, where will you live?                                       | <input type="checkbox"/> Off Campus             | <input type="checkbox"/> Dorm | _____                                         |                                                   |
| Are you involved in community service? <i>Please include details on resume</i> | _____                                           |                               |                                               |                                                   |
| If known, name of scholarship applying for:                                    | _____                                           |                               |                                               |                                                   |

If you are a high school senior residing in the SMCC district (Amite, Pike, Walthall, or Wilkinson counties) and applying for the Impact Scholarship, please include a 300 to 500-word essay in addition to your personal letter sharing a story about the teacher who has made the most significant impact on your life.

Name of Impact Teacher \_\_\_\_\_  
School Represented \_\_\_\_\_

In order to qualify for a scholarship from the SMCC Foundation, the applicant MUST:

1. **Submit FAFSA application** ([www.studentaid.gov](http://www.studentaid.gov)) SMCC Code 002436 and have information sent to SMCC.
2. **Provide a personal letter of 500 words or more** outlining future plans and goals, reason for applying for a scholarship, outlined need, and any other information deemed pertinent to application.
3. **Provide a resume** detailing education history, scholastic awards, extracurricular activities, community service, employment history, and current employment.
4. Maintain full-time status by enrolling in and maintaining at least 12 credit hours. Maintain an overall GPA of 2.5 or above. Some scholarships require a 3.0 or higher GPA.

*By completing and submitting this application, I certify that all of the information provided by me in this application is true to the best of my knowledge. I understand that this application does not guarantee me a scholarship award. I understand that awards will be chosen by the Foundation Scholarship Committee based on the criteria set by the scholarship donor. If chosen, I understand and agree that I must fully comply with all guidelines and requirements governing the scholarship in order to receive the award. Foundation Scholarship awards are not eligible to be refunded and will be reduced when actual college costs have been covered by other forms of financial aid.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Southwest Mississippi Community College does not discriminate on the basis of race, color, national origin, age, sex, religion, or disability in its programs, activities or employment practices. The following persons have been designated to handle inquiries and grievances regarding the non-discrimination policies: Mrs. Rhonda Gibson, Director of Disability Support Services, 601-276-3885; Mr. Blake Brewer, Vice President for Student Affairs and Title IX Coordinator, 601-276-3717; SMCC, 1156 College Drive, Summit, MS 39666.