



Alcorn State University National Alumni Association
MERIDIAN/LAUDERDALE CHAPTER



2020 Scholarship Application

LAST NAME:		FIRST NAME:		MI:	
STREET ADDRESS:		CITY:	STATE:	ZIP CODE:	
PHONE:	HOME:	MOBILE:	OTHER:		
EMAIL ADDRESS(ES):					
HIGH SCHOOL:			JUNIOR COLLEGE (IF APPLICABLE):		
ADDRESS:			PHONE:		
YEAR GRADUATED:		GPA:		ACTSCORE:	
1. Have you been accepted or are you currently attending Alcorn State University? YES or NO					
2. What is or will be your classification? _____					
3. What is your planned major and/or minor while attending Alcorn State University? _____					
4. Brief statement about why you choose Alcorn State University to continue your education. <i>(Type and attach to application)</i>					
5. Have you been awarded any other scholarships for the academic year? YES or NO					
If YES, please explain: _____					
6. Please explain in 100-200 words about yourself. Please list some of your extra curriculum activities and explain how they will help you with your future career goals. <i>(Type and attach to application)</i>					
Completed applications should be mailed to the following:					
Meridian Lauderdale Alcorn Alumni Chapter Attn: Scholarship Committee 126 50th Court Meridian, MS 39305 601-692-4874					



Please adhere to the following:

- Must have an ACT score of 18 or higher
- Must have a GPA of 2.75 or higher
- First priority given to Meridian and Lauderdale County students. (Students in surrounding counties may also apply.)

If you are selected as a recipient, a copy of your transcript and ACT score, as well as proof that you are currently enrolled at Alcorn State University, will be required. Application deadline is March 31, 2020. Notification awards will be made after March 31, 2020.

If you are selected as a recipient, will you be able to attend our scholarship banquet or send a representative with a response? **YES or NO**

Family members/friends wishing to attend must purchase a ticket to the event (\$50.00).

The scholarship gala will be held on Friday April 24, 2020 at the Riley Center, 2200 5th Street, Meridian, MS at 7:00pm.

Signature: _____ Date: _____

For Office Use Only

Date Received: _____

Application Complete: YES or NO

Accepted/Denied: _____

(If denied, Reason): _____

If Selected, Amount Awarded: _____