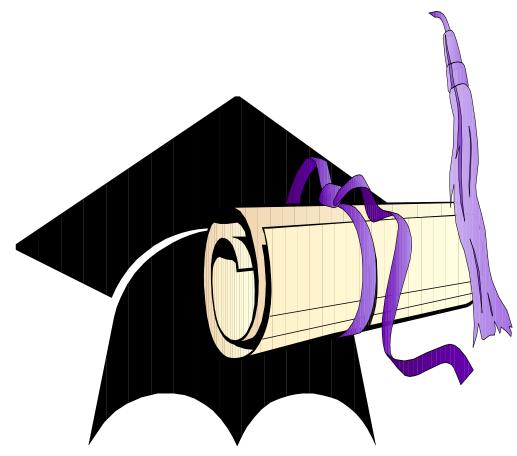
## 100 BLACK MEN OF THE MISSISSIPPI DELTA, INC.



**Scholarship Application** 

POST OFFICE BOX 426 GREENVILLE, MS 38701

APPLICATION DEADLINE: April 13, 2020 AWARD NOTIFICATION DATE: May 1, 2020

SCHOLARSHIP AWARDS PROGRAM: Thursday, May 28, 2020

#### **Dear Applicant(s):**

The 100 Black Men of the Mississippi Delta, Inc. are committed to the growth and development of America's youth. In addition to engaging in mentoring, education, anti-violence, and economic development programs. We feel it is important to aid in developing talented young Americans in their pursuit of higher education.

We will provide one-time scholarship awards to high school students who maintain at least a 3.0 cumulative grade point average (GPA) while attending a high school in Washington County, Sharkey County, Humphreys County, Sunflower County, Lakeside High or West Bolivar Consolidated school districts. Students must also have an ACT composite score of at least 18. The total value of each scholarship ranges from \$500.00 up to \$1,000.00 payable upon certified proof of enrollment in a Higher Education Institution on or before December 1, 2020.

Applications for scholarship must be received by April 13, 2020. Personal interviews with the committee or designated representatives may be required upon reasonable notice. Notification of awards will be made no later than May 1, 2020. The 100 Black Men of the Mississippi Delta Scholarship Awards Program is scheduled for, Thursday, May 28, 2020.

Applicants are required to answer all questions on the application. <u>Incomplete applications</u> will not be considered. Facsimiles will not be considered.

Please MAIL applications to:
100 Black Men of the Mississippi Delta. Inc.
Post Office Box 426
Greenville, Mississippi 38701

#### **SCHOLARSHIP CRITERIA**

- Must have at least a 3.0 Cumulative Grade Point Average in order to qualify for a scholarship award;
- Must have at least an 18 ACT score;
- Official Transcripts must be submitted with the application in a sealed envelope which includes your ACT score;
- Must attend school in one of the following counties or school districts: Washington County, Humphreys County, Sharkey County, Sunflower County School District, Lakeside High or West Bolivar Consolidated School District;
- Applicants are required to submit a written essay on the topic: "Why a college or post graduate degree matters in today's society." (300 words minimum);
- All applicants must appear for an oral interview upon request;
- The 100 Black Men of the Mississippi Delta, Inc. are providing scholarship support to individuals on an equal opportunity basis regardless of race, sex, creed, color, religious preference or national origin;
- All Recipients chosen to receive the 2020 Scholarship Award must provide a Certified Letter from the College Registrar as proof of enrollment on or before December 1, 2020 except students who enlist in the military;
- Certified proof of enrollment should be sent to the attention of 100 Black Men of the Mississippi Delta, Attn: Marvin Minor, 632 Tampa Drive, Greenville, MS 38702.

# 100 BLACK MEN OF THE MISSISSIPPI DELTA, INC. SCHOLARSHIP APPLICATION

Name	
Address	
City/State/Zip	Home Phone
Email Address	Cell Phone
High School Information:	
Name	
Address	
City/State/Zip	Phone
Principal Name	Counselor Name
Grade Point Average	
ACT Score	
College/University Information:	
Name	
Address	
City/State/Zip	Phone
Anticipated Major	Please provide Proof of Acceptance
Please attach your high school transcript.	
Parent(s) or Legal Guardian Occupation (s) Income Range (please select one)	
Income Range (please select one)	
Below \$25,000 \$25,000 - \$35,000	\$35,000 <b>.</b> \$50,000 \$50,000 - Above

### LEADERSHIP DEVELOPMENT

A.

<b>A.</b>	Extra-Curricular or Leadership involvement in high school (organizations, sports, or other positions held)				
В.	Community involve	ment			
Pleas	se indicate Scholarship	s or Grants that y	ou have been awarded:		
Amo	ount	Agency or	r Organization		
Amo	unt	Agency of	r Organization		
Amo	ount	Agency of	r Organization		
PLE	ASE LIST THREE RE	FERENCES BEI	LOW:		
<b>A.</b>	Name				
	Address				
	Phone				
_					
В.					
	1 none				
	Name				
	DI				
		ODMATON			
	IER PERTINENT INF		_		
Pleas	se list in twenty five wo	rds or less your c	areer goals.		
Are	you a 100 Black Men M	Ientee? YES NO			
Are	you a relative of a mem	ber of 100 Black	Men? YES NO		
-	you currently employed , where?	or have you been	within the past twelve months? Y	ES NO	
	Black Men Use Only: ewed By:		Award Amount: \$	_	
Defi			Community Service		