Mildred Barger McCormick Scholarship Fund

Scholarship Application

(Please type or print)

Due to Guidance Office by March 29, 2019

Name:

Address:

City: Zip Code:

County: Telephone:

List colleges, universities, or other educational institutions where you have applied:

1.

2.

Which has accepted you?

Do you plan to attend? Major/course of study proposed:

When would you begin? Full Time? Part Time?

Approximate yearly cost of education:

Have you applied for grants, loans scholarships, or other financial aid?

Have you been awarded any form of financial assistance?

Total amount you expect to receive?

Please circle yes or no as to whether you expect to receive the following types of financial aid.

Pell Grant Yes No Don’t know

Illinois State Monetary Award (MAP) Yes No Don’t know

Work-Study Program Yes No Don’t know

GI Benefits Yes No Don’t know

Other:

How would winning this scholarship award affect the pursuit of your educational goals?

High School Grade Point Average through latest completed semester?

List extracurricular activities in which you have participated as a high school student:

**On a separate sheet of paper write a 400-word essay, MLA format required, on how and when your family arrived in Pope County. Please include family occupations, achievements, and beliefs.**

*I certify that the information contained in this application is true and correct to the best of my knowledge and that the essay submitted with the application is entirely my own work. I further certify that if selected and awarded this scholarship, I shall use the funds for the intended purpose, and if I do not carry out my plan to further my education, I shall return the funds.*

*Signature: Date:*

*The student is under 18 years of age. I am the parent of the student, and I confirm that the information is correct and that the funds shall be used for the intended purpose.*

# Parent/Legal Guardian’s Signature: Date: