

2024 SUBMISSION DEADLINE JANUARY 15TH

MISSISSIPPI RURAL WATER ASSOCIATION SCHOLARSHIP APPLICATION



Mississippi Rural Water Association

172 Country Place Parkway Phone: 601.857.2433
Pearl, MS 39208 Fax: 601.857.2434

MsRWA

Committee

The MsRWA Scholarship Fund was established to recognize individuals such as Pete Boone, the late Mr. Edward A. May & others for their long time contributions to the water and wastewater industry in Mississippi. The scholarship is administered by a committee appointed by the Board of Directors of the Mississippi Rural Water Association, Inc. The scholarship committee is responsible for selecting the recipient.

Shelley Ellard Central Water Assn.
Willette McClain Clayton Village Water Assn.
Daniel Hemphill Copiah Water Assn.
John Gunn Culkin Water District
Kevin Hand South Central Water Assn.
Patricia Spangler Tishomingo Co Water Dist.

Personal Data

_____ Social Security #: _____
 Last Name First Middle
 _____ MS Phone: _____
 Address City Zip

Eligible Voting Member Employee Data

_____ MS
 Name of Person Employed at Member System Job Title

 Name of Voting Member System Address City Zip
 Relationship to Applicant: _____ Phone: _____
 Applicant is a dependent on Member's tax return: _____ Yes _____ No
 If no, please explain: _____

High School Data

School Name: _____ Graduation Date: _____
 _____ MS
 Address City Zip
 Class Rank: _____ Number of Students In Class: _____ Grade Point Average: _____ ACT Score: _____
 List below any academic awards, memberships or other special recognition you have received:

 Guidance Counselor's Signature: _____ Date: _____
 Phone Number: _____ If already attending college, no guidance counselor signature required.

College/University Data

Will the 2023 Fall Semester be your first year of higher education? _____ Yes _____ No
 If "No", College Transcript Required, Number of Credit Hours Completed: _____
 Number of Credit Hours required to graduate: _____ College Grade Point Average: _____

Special points of interest:

- Application must be typed or neatly printed. Must be submitted in hard copy.
- Transcript & tax information must be submitted with the application.
- All blanks must be filled in.
- The scholarship will be awarded to a dependent of a MsRWA Voting Member employee (must be affiliated with the Water or Wastewater Dept.). Membership must be in good standing.
- MsRWA Directors, Staff & Scholarship committee dependents are excluded.
- Applicant can re-apply annually.
- On a separate page, in 250 words or less, write a brief essay on your goals as they relate to your education, career and future plans. (Please type) Essay must be signed by applicant.
- Committee would like to have a video of the applicant stating essay, if possible. (HIGHLY RECOMMENDED)
- It is strongly recommended that the recipient be present for the awarding of Certificate at MsRWA Conference.

OFFICIAL RULES

This scholarship of up to Fifteen Hundred dollars (if funds are available) is awarded to a student to defray the cost of tuition, books, or room and board at an accredited institution of higher learning that is approved by the Mississippi Rural Water Association (MsRWA) Scholarship Committee. Disbursement of the money is made upon presentation of the winner's college or university full-time enrollment form for the Fall semester. The scholarship money is paid directly to the college or university. The scholarship is awarded to a dependent of a MsRWA Voting Member employee. In order to be eligible for this scholarship, applicants must complete the application form in its entirety and all required information returned. **Applicant must be a dependent on the member employee's tax return.** If an item is not applicable, please place a N/A in the blank. Leave no blanks unanswered. Upon completion, return the application to the MsRWA Scholarship Committee by **January 15th**. All applications are screened on the basis of leadership responsibilities in the community and school activities, as well as grade point average. The scholarship recipient is selected on the basis of the number, length of commitment, and quality of leadership responsibilities in the community, as well as, school activities, awards, honors, academic record, career goals, and financial need. Applicants are evaluated on a comparative basis at the sole discretion of the committee. Should the parent of the scholarship award leave the employment of the affiliate voting member for any reason, the student is no longer eligible for the award. **If the student changes schools the balance of the funds are not transferable. They will be returned to the Scholarship Fund.**

Application and required documents must be submitted in hard copy with the video on a thumb drive.

No submission will be accepted by email.

Required to send in additional/updated information, from time of application submission until **January 15th each year.**

Strongly recommended to be present at the Award Ceremony at MsRWA Conference.



ESSAY

Committee highly recommends that you send in a video type of the applicant stating/reading a brief essay of 250 words or less stating your goals as they relate to your education, career, and future plans, but if not possible, place essay on a separate page. (Please type) Essay must be signed by applicant.

College/University Data Continued

Name of College/University _____ Phone _____

Address of Admissions _____ City/St/Zip _____

Please indicate: 4 Year College/University 2 Year Community/Junior College
 Vocational Technical School Graduate School

Major Course of Study: _____

Financial Data (MUST BE WITH APPLICATION TO QUALIFY) Return a copy of the last two years tax returns with your application.

Please indicate which of the following income ranges matches your family's gross income:
 Under \$30,000 \$30,000-\$44,999 \$45,000-\$59,000 \$60,000-\$74,999 over \$75,000

If you are receiving other financial aid (including all scholarships), please itemize by name and amount.

Name: _____ Amount: _____

Name: _____ Amount: _____

If there are any family circumstances that would influence your need for financial assistance, please describe:

Please add other activities including those that are work related:

Certification

In submitting this application, we certify that the information provided is complete and accurate to the best of our knowledge. False information will result in the revocation of any scholarship granted.

Applicant's Signature _____ Date _____