

## Mississippi Municipal Clerks & Collectors Association

# Scholarship Program

The Mississippi Municipal Clerks and Collectors Association will present a \$1,000.00 scholarship to a graduating senior at the Mississippi Municipal League Annual Conference in July 2021.

The scholarship competition is open to any high school senior whose parent, guardian or grandparent is a member of the MMCCA in good standing and who plans to attend an accredited community college, college or university.

A) An applicant who is the child of a clerk or deputy in good standing will be given 1<sup>st</sup> Preference, followed by a grandchild receiving 2<sup>nd</sup> preference. B) The scholarship applicant may be a student who is attending a public, private or home school. C) The scholarship recipient will be announced at the spring conference of each year and awarded at the annual MML Conference. D) The recipient must be enrolled as a full-time student or provide a letter of intention to be a full-time student. Scholarship funds will only be forwarded to the winner's school of choice. To apply, a student must (1) complete the application form, (2) a letter why the student feels they should receive the scholarship (3) letter of recommendation from school official and or city official, and (4) all supporting information as stated in the application. Any application that does not contain all the requested material will not be considered.

*THE APPLICATION DEADLINE IS FEBRUARY 28, 2021.  
Mississippi Municipal Clerks & Collectors Association  
Scholarship Application*

Name: \_\_\_\_\_

High School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

List Scholarship(s) Applied for: \_\_\_\_\_

Grade Point Average (please attach transcript with verification from School) \_\_\_\_\_

Class Ranking \_\_\_\_\_

ACT/Sat Test Scores \_\_\_\_\_

Letter of Recommendation from School on Letterhead (please attach)

One Letter of Recommendation, not family

Essay 500 Words or Less Outlining Goals of Study (please attach)

School & Community Activities (please attach list)

Community College, College or University you plan to attend:

Name of Parent/ Guardian working in Municipal Government, title and name of Municipality (dues must be paid up to date): \_\_\_\_\_

Signature of applicant \_\_\_\_\_

Date \_\_\_\_\_

*If you have any questions please contact Mary Roberts committee chairperson,  
P O Box 27, Guntown, MS 38849; 662-348-5353 ext. 23*