

Scholarship Application Exclusively For Hinds Community College-Rankin Campus

A parent or grandparent must be employed with a business that is a Pearl Chamber of Commerce Member

Scholarship Amount - \$2500

Due By: Friday March 31, 2023

Mail to: Pearl Chamber of Commerce PO Box 54125 Pearl, MS 39288-4125

or

Bring in person to: 110 Lonnie Jenkins Drive Pearl, MS 39208 601-939-3338

Personal Data

Student Name_	
Mailing Address	
Student's Email Address:	
Parent(s) Name(s)	
Parent Phone Number(s)	
Parent/Parents employed by	

School Data		
GPAACT score:		
Verification of Information: I attest	that the school data listed above is accurate.	
Name	Title	
Signature	Date	
Other Information		
Do you plan to apply for federal aid	/FAFSA? YES or NO	
Is your household income \$60,000 c	or LESS? YES or NO	
List any other aid you have b	oeen awarded:	
Future education and career	goals:	
Additional <u>REQUIRED</u> Info	rmation	
Attach the following to this applicat • Resume • High School Transcript • Short essay (1 page maximum) ex of this scholarship would benefit you	xplaining how an award of	
Student Signature:	Date:	