Yazoo Community Scholarship Applicants

YAZOO CITY- Applications are now available for the 2025 recipients. All High School students that attend a Yazoo County school who are continuing their education past the high school level are eligible to apply for this scholarship. Scholarships will be awarded to the most deserving applicants made by an anonymous selection committee. Amount awarded is based on donations received by the scholarship fund. The deadline for applications to be received is Friday, April 11, 2025.

Over 500 scholarship recipients have been awarded since the fund started. Many individual residents as well as area business have given to the scholarship fund so that students can further their education.

High School Students who are in need of assistance can pick up an application from their high school counselors or contact: Karly Albin, Bank of Yazoo City, P.O. Box 600, Yazoo City, Ms 39194.

For individuals who would like to honor a parent, spouse, grandparent, friend, or employee can send a contribution to the Yazoo Community Scholarship Fund. This is an excellent way to show appreciation, and give deserving students help with the rising cost of tuition and books. One hundred percent of the funds donated will be awarded. Donations should be mailed in by Friday, April 4, 2025, to Karly Albin, Bank of Yazoo City, P.O. Box 600, Yazoo City, Ms 39194.

Please do not miss out on this wonderful opportunity to contribute to the education of the young, bright minds of our community. Any amount of donations is very much appreciated. Thank you and Good Luck to all who apply!

Sincerely,

Mattie Ragland (YCSF President)

Yazoo Community Scholarship Fund

Application Form

Application must be received by: <u>April 11,2025</u>

	Date:
School currently attending:	
Please check one of the following:	
: First time applicant	
: Re-applicant previously awarded	
Student Name:	
Student Phone Number:	
Student Email:	_
Address:	
Social Security Number:	
Parent/Guardian:	_
Parent Email:	_
Phone:	
(Home)(Work)	
Address of Parent/Guardian:	
Occupation of Parent/	

Guardian:

Anticipated cost of one year at college of choice.						
List any other sources of income/ assistance available such as other scholarships/grants, received and / or employment plans while attending college.						
Please check one of the following that descri	bes your COMBINED family income:					
15,000- 25,000						
26,000- 50,000						
51,000 - 75,000						
76,000 or above						
Please list any siblings enrolled in school or	college at the present time.					
Name Grade or College level						
<u></u>						
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** RE- APPLICANTS: The following is not	required to re-apply. Only First time applicants.					
Please attach the following with this appli	cation.					

- I. Three letters of reference from the following:
 - 1. Teacher
 - 2. Community or Church contact
 - 3. One other (not an immediate family member)
- II. Copy of the applicant's high school transcript with overall GPA, ACT score, achievement test scores, and National Merit scores (if applicable)
- * Note: a minimum of 2.75 is required for high school seniors and 2.75 for college students to be eligible; all re-applicants must verify they are a full time student. 2.75 or higher must be maintained to keep this scholarship.
- II. A biographical statement is to include a discussion of his/hers scholastic interests, general interest and hobbies, and the reason for the career for which he/she is preparing. This statement should be written in a direct manner and should not exceed 500 words.words.