



MOBILE COUNTY TRAINING SCHOOL

Alumni Association

Scholarship Committee

Post Office Box 11362 Chickasaw, Alabama 36671

http://www.mctswhippets.org

"Another Step Forward"

Scholarship Application

(Please Print or Type all information)

Send the completed packet\* to the address above.

Note: All Applications Must be Postmarked by March 18, 2022

Personal

Name (Last) (First) (Middle)

Present Address

Telephone home cell

Email

Age Birth date Birth place

Ages of brother(s) and sister(s)

Father's name Mother's name

Employer Employer

Occupation Occupation

MCTS Affiliation:

MCTS relatives name Year(s) at MCTS

(High School) or (Middle School)

Circle relative's affiliation (s) with MCTS: Alumni Staff Faculty

Applicant's Background:

School you are graduating from GPA (weighted) (un-weighted)

SAT (weighted) (un-weighted) ACT (weighted) (un-weighted)

College you plan to attend

College Address

City State

Number of sibling(s) attending or have attended post-secondary school

\*Completed Packet must include application and ALL items listed in Criteria.

## SCHOOL ACTIVITIES

List each school activity in which you have participated during the past 2 years (e.g. student government, clubs, music, sports, etc.). List special awards, honors, positions, and office held during the years in which you participated. List the academic years during which you participated.

Activity	Sponsor	School's Phone Number	Special Awards/Honor	Office held	Years

## CHURCH ACTIVITIES:

List each Church activity in which you have participated during the past 2 years (e.g. student government, clubs, music, sports, etc.). List special awards, honors, positions, and office held during the years in which you participated. List the academic years during which you participated.

Activity	Sponsor	Church's Phone Number	Special Awards/Honor	Office held	Years

**Community and Volunteer Activities.**

List community and volunteer activities in which you have participated without pay during the past 2 years (e.g. Red Cross, Big Brother/Big Sister, youth group, Nursing Home, etc.). Indicate special awards and honors. List the academic years during which you participated.

Activity	Sponsor	Church's Phone Number	Special Awards/Honor	Office held	Years

Comments

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Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_