The Robert Kirk Memorial Scholarship

**SCHOLARSHIP APPLICATION GUIDELINES**

The **Robert Kirk Memorial Scholarship** will be awarded based primarily on excellence, leadership, perseverance and financial need.

One scholarship is granted for one academic year in the amount of $1000.00 and maybe renewable for one year based on academic good standing.

Scholarship is awarded for one academic year in the amount of $500.00 (August) and $500.00 in (January) upon proof of active school enrollment.

**SCHOLARSHIP APPLICATION PROCEDURE**

1. Complete the scholarship application form.
2. Write an essay addressing the questions listed in the award criteria.
3. Request an official copy of transcript and include with your scholarship application.
4. Submit your entire scholarship application package to the Robert Kirk Memorial Scholarship in one envelope. A completed package must include:
   1. Completed, signed application form.
   2. Essay (typed, 250 words).
   3. 1 -2 letters of recommendation.
   4. Official high school transcript or college transcript.
   5. Copy of your college acceptance letter.
5. Mail to **Mount Pleasant Home Protection Society** Attn: Robert Kirk Memorial Scholarship, PO Box 96, Ralph, AL 35480. All packages must be postmarked no later than June 2, 2024. The application and supporting documents can also be emailed to [audreyipbrooks@gmail.com](mailto:audreyipbrooks@gmail.com).

**Scholarship Award Criteria**

1. Must be a high school senior graduating in good standing
2. Must have exhibited leadership qualities in high school, church and community activities.
3. Provide at least two letters of recommendation from high school teacher or counselor and community leader or pastor, etc.
4. Must submit a typed essay (250-500 words maximum) outlining future goals and briefly state why you should be awarded the scholarship.
5. Must submit a copy of acceptance letter from the post-secondary school that you will attend.
6. Must maintain at least 3.0 GPA for the renewable award the second year.

The Robert Kirk Memorial Scholarship.

**SCHOLARSHIP APPLICATION**

Please type or print clearly using black ink.

Applicant’s Full Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt #\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_

Telephone ( ) \_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_ Telephone \_\_\_\_\_\_\_\_\_\_\_\_

List your school, church, community activities \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List leadership positions held in school, church, community organizations \_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you been accepted for admission to a post-secondary college or university within the state of Alabama or Mississippi? Yes\_\_\_\_ No\_\_\_\_

Please indicate the semester and year you plan to enroll. Fall 20\_\_\_ Spring 20\_\_\_

Name of MPHPS member affiliate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent(s) or Legal Guardian(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_ Telephone \_\_\_\_\_\_\_\_\_

**I certify that the above statements are true and accurate to the best of my knowledge.**

**Signature of Parent/ Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_**

**The entire scholarship application requirements and supporting documents must be received in one package. Incomplete packages will not be considered. Faxed applications will not be accepted.**