

The Nece Hopson Memorial Foundation, Inc.

"To make a difference in the lives of others"



Post Office Box 408
Centerville, Georgia 31028
Nece1hmf@gmail.com

Greetings Scholarship Applicant:

The following instructions are provided for the 2024 Nece Hopson Memorial Scholarships:

- 1) **Scholarship Awards of \$1,000 each are available for high school students of Houston County.** Students applying for the awards must select one of the award categories listed on the attached application. Only one application package will be considered for each student.
- 2) **Purpose:** The annual scholarships are offered in loving memory of Henecia (Nece) L. Hopson with the purpose of providing financial assistance to deserving students who have a financial need and a desire to further his or her education beyond high school.
- 3) **Qualifications:** The scholarships are available to high school seniors of the 2024 graduating class of one of the high schools within Houston County. The applicant must also have the necessary qualifications for acceptance by an accredited university of his or her choice. **Note:** Relatives of members of the Board of Directors of the Nece Hopson Memorial Foundation, Incorporated cannot be considered for the scholarship awards.
- 4) **Application Package:** The following documents must be received with each application package: (Submit 2 copies of the complete application package if mailed or 1 copy if submitted electronically.)
 - a) A complete and signed application form (application is attached).
 - b) Two letters of recommendation from someone other than a family member.
 - c) A written essay to describe how this scholarship will assist you in obtaining a future goal in life. (Must be at least one page long.)
- 5) **Deadline: March 30, 2024** Application packages must be received by March 30, 2024. Electronic packages should be emailed to: nece1hmf@gmail.com . All mailed packages should be sent the following address:

The Nece Hopson Memorial Foundation, Inc.
Attn: 2024 Scholarship Committee
P. O. Box 408
Centerville, GA 31028

Application packages will be evaluated based on the information received in the package, to include the information on the application form, the written essay, and the letters of recommendation.

If you have any questions, please send an email to nece1hmf@gmail.com .

Best Wishes,

2024 Scholarship Committee
Nece Hopson Memorial Foundation, Inc.

**APPLICATION FOR
THE 2024 NECE HOPSON SCHOLARSHIP AWARDS (\$1,000.00 each)**

**Scholarship Award Categories: Applicant should identify the specific award.
Please select only one category.**

- () Houston County High School Award* () Northside High School Award*
() Perry High School Award* () Warner Robins High School Award*
() Veterans High School Award* () Historically Black College/University (HBCU)**

*Students applying for one of these awards must be a member of the 2024 graduating class from the high school selected. The student should specify the college/or university that he/she plans to attend.

**Students applying for this award must be a member of the 2024 graduating class of a high school in Houston County and must attend a HBCUs during the 20242025 academic school year. The student should specify the university or college that he/she plans to attend. If you select this category, you cannot apply for a specific high school award.

GENERAL INFORMATION

Name: _____

Street Address: _____ City/Zip: _____

Email Address: _____ Telephone #: _____

Name of Parents: _____

High School: _____ Grade Point Average: _____

SAT or /ACT Score: _____

COLLEGE or UNIVERSITY SELECTED

Have you selected a college or university? _____

Have you been accepted by the institution selected? _____

If you answered “yes” to the above questions, list the name and address of the college or university that you plan to attend.

If you answered “no” to the above two questions, please describe your plans for deciding on a university and obtaining acceptance.

FINANCIAL NEED INFORMATION (Select One)

Family Income: () Under \$26,000 () \$26,001 - \$40,000 () \$40,001 - \$60,000

() \$60,001 – \$80,000 () \$80,001 - \$100,000 () \$100,001 – \$125,000

() \$125,001 - \$150,000 () Over \$150,000

Total number in your immediate family: _____

Have you received or anticipate receiving other scholarships or grants? () Yes () No
(If so, please identify the amounts) \$_____

\$_____

Total estimated amount required for the
academic school year (2024-2025) \$_____

Total amount expected from other sources
(Scholarships, grants, family members, HOPE) \$_____

Remaining amount needed for the academic school year \$_____

If you would like to submit additional information to be considered about your financial need, please attach it to the application form. However, no additional information is required.

Extracurricular Activities

An additional page may be attached to the application to address this area or provide the information in the space listed below.

Applicant's Signature _____ Date _____

For Your Information: All scholarship checks will be disbursed by July 01, 2024, and will be made payable to the college or university listed on the application package unless otherwise notified.