



2019-2020

Mitchell Community College Scholarship Application

Priority Date: May 31, 2019

SCHOLARSHIPS: Each student applying for a Mitchell Community College endowed scholarships are required to complete a FAFSA (Free Application for Federal Student Aid) and the Mitchell Scholarship Application. The College will consider all applicants for available scholarships. A 2.0 GPA or higher, and enrollment in nine or more credit hours at Mitchell are required for most scholarships. Scholarships set up by outside donors will be awarded to students based on donor's criteria.

PLEASE PRINT LEGIBLY AND RESPOND TO EACH ITEM (Please use ink pen.)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_
Street City State Zip

Student ID# \_\_\_\_\_ Iredell County Resident [ ] Yes Major at Mitchell: \_\_\_\_\_

If majoring in the nursing program, have you been accepted into the clinical portion of the nursing program? [ ] Yes

If graduated, or plan to graduate from an Iredell County High School, check appropriate high school:

North Iredell [ ] Yes South Iredell [ ] Yes West Iredell [ ] Yes Statesville Senior High [ ] Yes
Mooresville Senior High [ ] Yes Lake Norman [ ] Yes Year Graduated \_\_\_\_\_

Have you attended Mitchell Community College previously? [ ] Yes

If yes, number of hours completed \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

Check your planned enrollment status: Full-time [ ] Yes Part-time [ ] Yes

SCHOLARSHIP AWARD INFORMATION (REQUIRED)

Please describe your career objectives and how this scholarship will assist you with meeting these goals. Please also list any extracurricular involvement, including athletics, as well as any honors or awards received to assist in evaluating your application for scholarships. Please include information if you or an immediate family member has been directly affected by cancer. THIS SECTION MUST BE COMPLETED IF YOU ARE APPLYING FOR SCHOLARSHIPS. (You may attach additional sheets if necessary.)

Blank lines for writing the scholarship award information.

**SCHOLARSHIP AWARD INFORMATION (cont.)**

**Mitchell Community College has a variety of scholarships available for students. Some of them have specific criteria. In order to determine your eligibility for these scholarships, please check Yes if any apply to you.**

Do you plan to transfer to a 4-year college or university and major in **one** of the following?

History  **Yes**      Political Science  **Yes**      Library Science  **Yes**

Elementary Education  **Yes**      Teaching  **Yes**

Are you an adopted child, foster child, or have you lived in a group home?  **Yes**

Are you a descendent of one of the following? (Check all that apply):

Elizabeth Hill  **Yes**      Harvey Murdock  **Yes**      Jesse Tilden Davis  **Yes**

George A. Scott  **Yes**      Are you a cousin or family member of Jane Shaw Myers?  **Yes**

Does one or more of the following sources pay any portion of your tuition, fees, or books?

Employment Security Commission  **Yes**      TAA (Trade Adjustment Assistance—ESC)  **Yes**

Other  **Yes**      Please list \_\_\_\_\_

Are you, your spouse, or one of your parents employed by the City of Statesville?  **Yes**

If yes, list the employee's name \_\_\_\_\_

Are you a child or grandchild of a Mitchell College or Mitchell Community College graduate?  **Yes**

Name of Graduate \_\_\_\_\_ Year graduated \_\_\_\_\_

Are you a descendant of a Davis Hospital School of Nursing graduate?  **Yes**

Name of Graduate \_\_\_\_\_ Year graduated \_\_\_\_\_

Are you a child of an employee of L. Gordon Iron & Metal Company?  **Yes**

If yes, parent name \_\_\_\_\_

Are you a child of an employee of Rental Uniform Services?  **Yes**

If yes, parent name \_\_\_\_\_

Are you an active member of the SGA, or an active member of a Mitchell Community College club?  **Yes**

Are you a member, or an immediate family member, of the Cool Spring Fire Department, or the Iredell County Rescue Squad?  **Yes**

If an immediate family member, member's name \_\_\_\_\_

Are you a member, or an immediate family member, of the Statesville branch of the NAACP?  **Yes**

If an immediate family member, member's name \_\_\_\_\_

Are you a Marine, child, grandchild, or great-grandchild of a Marine?  **Yes** (Please provide copy of DD214.)

If direct descendent, Marine's name \_\_\_\_\_

Are you receiving any other scholarships?  **Yes** If yes, Please list the name and amount of the scholarship(s) you have been awarded for 2019-2020:

Name \_\_\_\_\_ Amount \$ \_\_\_\_\_

Name \_\_\_\_\_ Amount \$ \_\_\_\_\_

**Scholarship information may be released for publicity. Mitchell Community College awards financial aid without regard to race, ethnicity, religion, sex, age, disability, or national origin.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_