

**COAHOMA COMMUNITY COLLEGE
SCHOLARSHIP APPLICATION**

Name of Scholarship _____

Scholarship Semester / Year _____ / _____

Applicant Name

Home Address

City

State

ZIP

Name of High School Attended: _____

Address

City

State

ZIP

County

Current GPA _____ Classification: (check one): Freshman Sophomore

Major: _____

Are you enrolled in at least twelve (12) semester hours? (check one): Yes No

Have you applied for PELL grant? (check one): Yes No

Please write a brief self-portrayal: _____

Return this application along with two (2) letters of recommendation to the Scholarship Committee or designee.

*Students may apply for more than one scholarship. Separate applications **must** be completed for each scholarship.

Coahoma Community College is an equal opportunity institution in accordance with civil rights and does not discriminate on the basis of race, color, national origin, sex, disability, age, or other factors prohibited by law in any of its educational programs, activities and employment opportunities. The following person has been designated to handle inquiries regarding the nondiscrimination policies: Taneshia T. Turner, Director of Employee Services/Coordinator for 504/ADA, Title IX Compliance Officer, Office #A100, Vivian M. Presley Administration Building, 3240 Friars Point Road, Clarksdale, Mississippi 38614, Phone: (662) 621-4853, Email: tyoung@coahomacc.edu.