



MISSISSIPPI JUNIOR MISS SCHOLARSHIP REQUEST FORM

\_\_\_\_\_  
(Print Your Name)

\_\_\_\_\_  
(Year and Name of Junior Miss Program)

\_\_\_\_\_  
(Scholarship/Award Requested)

I will be attending \_\_\_\_\_ beginning \_\_\_\_\_. I am  
(College or University) (Date)

requesting \$ \_\_\_\_\_ from my scholarship award. This represents \_\_\_\_\_ of  
(Amount) (All or Part)

my scholarship award. The funds are due at the school by \_\_\_\_\_.  
(Date)

I understand that the check will be made payable to both the school and me. I understand that if I leave school for any reason or am no longer a full-time student, any refund of my scholarship award from the college or university will be refunded to Mississippi Junior Miss Program, Inc. I also understand that I am to furnish copies of my grade reports, which should include any credits earned to Mississippi Junior Miss Program, Inc. I will furnish this information at the end of each grading period for which scholarships are used.

\_\_\_\_\_  
(Full Name – Signature)

\_\_\_\_\_  
(Social Security Number)

\_\_\_\_\_  
(Date)

Send the check to:  
College or university \_\_\_\_\_  
Complete address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This form must be completed and returned to Mississippi Junior Miss Program, Inc. before any funds can be paid from scholarship awards. If you do not plan to use your scholarship award immediately following your high school graduation, you must notify the Mississippi Junior Miss Program. Keep this form to use when you request the scholarship funds. Make additional copies as needed.

Return form to:  
Phyllis Skipper  
Scholarship Chairman  
3206 Parkway Blvd.  
Meridian, MS 39305

\*\*\*\*\*For Bank Use Only\*\*\*\*\*

To: Citizens National Bank, P.O. Box 911, Meridian, MS 39302-9989 Attn: Trust Department  
Re: Mississippi Junior Miss Program, Inc.

You are authorized to forward the above funds payable to the scholarship recipient and the school and FORWARD said funds directly to the school named above.

Mississippi Junior Miss Program, Inc.

by \_\_\_\_\_ Date \_\_\_\_\_  
(authorized signature)