



2024-2025

Mitchell Community College Scholarship Application

Priority Date: May 31, 2024

SCHOLARSHIPS: Each student applying for a Mitchell Community College endowed scholarship is 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. 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.

List any extracurricular activities including athletics _____

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** Theology **Yes**
English **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?

NC Works Career Center **Yes** WIOA Program **Yes**

Other **Yes** Please list _____

Are you currently receiving, or have received support from Dove House Services? **Yes**

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 Davis Regional Medical Center? **Yes** If yes, parent name _____

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 descendant, 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 2024-2025.

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 _____