



**SOUTHERN
MISSISSIPPI**

MTA College Educational Scholarship

Name of Applicant _____

Social Security Number _____

Address _____

Telephone _____ Date of Birth _____ Citizenship _____

USTA number _____

Parent email: _____

EDUCATIONAL BACKGROUND

School Name _____

Address _____

Guidance Counselor _____ Telephone _____

Number of Credits Completed _____ Graduation Date _____

Cumulative grade point average _____

College Entrance Test Scores: SAT _____ ACT _____

Which college do you plan to attend? _____

Have you applied for admission? _____ Have you been accepted? _____

When will you begin your fulltime studies? _____

What academic major will you pursue? _____

USTA PROGRAM PARTICIPATION

In which USTA programs did you participate? _____

When? _____ Where? _____

Do you have a MTA ranking? _____ What is it? _____

Have you received any special awards because of your USTA participation? ____

What are they? _____

EXTRACURRICULAR ACTIVITIES

List honors or awards received while in high school: _____

Identify extracurricular activities in which you have participated: _____

List any community activities or honors: _____

Have you applied for any other USTA support in the form of scholarships? ____

If yes, what type of support? _____

Have you received other scholarships? ____ In what amount? _____

I declare that the information reported on this form, to the best of my knowledge and belief, is true, correct and complete.

Applicant's Signature _____ Date _____

Parent's Signature _____ Date _____

Please be sure to include with this application all materials required in the application process instructions.

DEADLINE TO SUBMIT APPLICATION: April 30