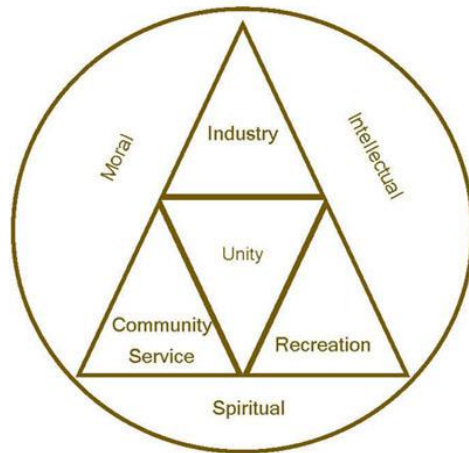


The Council of Community Organizations (COCO) of Oktibbeha County Inc.

# Valeria Cain Memorial Scholarship



This Scholarship is dedicated to the loving memory of

~~~ Valeria Cain ~~~

Her Daughter has established this scholarship  
award in his honor to recognize her love for Children.

Post Office Box 152, Starkville, MS 39760

**VALERIA CAIN MEMORIAL SCHOLARSHIP APPLICATION**

The Council of Community Organizations  
P.O. Box 152  
Starkville, MS 39760

Receipt Deadline: April 15, 2015

**PART I: To be completed by Scholarship Applicant**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ S.S. #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No: \_\_\_\_\_

High School: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Parent(s) or Guardian(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone No: \_\_\_\_\_

***College(s)***

***Tuition and Educational Expenses***

1<sup>st</sup> Choice: \_\_\_\_\_

1. \_\_\_\_\_

2<sup>nd</sup> Choice: \_\_\_\_\_

2. \_\_\_\_\_

3<sup>rd</sup> Choice: \_\_\_\_\_

3. \_\_\_\_\_

- A.) High School Seniors required documents: (1) the VALERIA CAIN MEMORIAL SCHOLARSHIP application form; (2) high school transcript with first semester senior grades; (3) three letters of recommendation from a faculty members, community leader or clergy; (4) list of extracurricular activities and involvement in community service activities; (5) two page essay outlining leadership involvement, community involvement and future goals; (6) other information which might be helpful to the scholarship committee.

**Part II : To be completed by High School Seniors**

Institutional Preference: \_\_\_\_\_ Have you been accepted? Yes \_or No\_.

I, \_\_\_\_\_ hereby authorize \_\_\_\_\_ to advise the Council of  
(Name of Principal)  
Community Organizations, of Oktibbeha County, Valeria Cain Memorial Scholarship committee, my  
demonstrated financial need. This is for the purpose of submitting an application for the Scholarship  
Program.

Signed: \_\_\_\_\_  
(Signature of Student)

Date: \_\_\_\_\_

**To be Completed by High School Principal**

I certify that this student is eligible under current USDA guidelines for either **(please circle)** Free or Reduced  
or Paid lunch participation and that this student will meet the established criteria for obtaining a Mississippi  
High School Diploma at the conclusion of this current school year.

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of High School

\_\_\_\_\_  
School Phone Number

\_\_\_\_\_  
School's Percentage of Students Eligible for  
Free/Reduced Lunch

Please return this completed form to the applicant on or before \_\_\_\_\_

Return Date Supplied  
By Applicant

### **Who is Eligible**

- 1. An eligible student must be a graduate of a High School in the Starkville or Oktibbeha County.**
- 2. An eligible student must demonstrate a commitment to school, academics, and community activities.**
- 3. Preferably a member of the Council of Community Organizations (COCO) of Oktibbeha County Inc.**

## **VALERIA CAIN MEMORIAL SCHOLARSHIP**

### **About the Program**

Valeria Cain lived a long and prosperous life. During his life, she was involved in many activities in the community. Her daughter, Joyce Cain have established this scholarship in his honor to recognize his love for children.

The purpose of this scholarship is to support post-secondary education for qualifying graduates of a high schools in Starkville and Oktibbeha County, Mississippi. The recipient of the scholarship will be a student who best exemplifies a desire for learning as outlined in the application process.

One (1) scholarships in the amount of \$500.00 will be awarded in two increments of \$250.00 per semester. Applications will be accepted starting January 10, 2015 and the deadline for submitting applications is April 15, 2015. The two (2) winning applicants will be contacted by May 2015.

## **How to Apply**

If a student meets the preceding eligibility criteria, he/she must submit: (1) the Valeria Cain Memorial Scholarship application form; (2) high school transcript with senior year, first semester grades for senior year; (3) three letters of recommendation from a faculty member, community leader, or clergy; (4) list of extra curriculum activities and involvement in community services activities; and (5) two page letter or essay to the selection committee outlining leadership responsibilities and future goals; and (6) any other information which might be helpful to the scholarship committee.

The student's application and documented forms must be **received by April 15, 2015.**  
**P.O. Box 152, Starkville, MS 39760**

## **How Winners are Chosen**

The selection committee for the Valeria Cain Memorial Scholarship will select finalists from students who meet the application deadline and other stated selection guidelines. Candidates will be evaluated on the following criteria:

1. Involvement in extracurricular and community services activities
2. Character, integrity, and leadership skills
3. Satisfactory academic record
4. Recommendations
5. Original written two page essay.
6. Financial Status
7. Council of Community Organizations membership

The members of the Council of Community Organization's Valeria Cain Scholarship selection committee may request to interview finalists.

**\*\*\*WINNER WILL BE NOTIFIED IN MAY \*\*\***

**SCHOLARSHIPS WILL BE AWARDED TO THE WINNER ENROLLED IN AN ACCREDITED  
UNIVERSITY/COLLEGE OF HIS/HER CHOICE.**

## Release of Information Form

Notice to Applicant:

From time to time, the Council of Community Organization of Oktibbeha County, Inc. may want to use your name and written selection and/or picture in a media release, brochure, or other publications.

(Please check one)

\_\_\_\_\_ I give permission to include my name, photo, and written selection in this type of promotional literature.

\_\_\_\_\_ I do not give permission to include my name, photo, or written materials in this type of promotional literature.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Applicant