



**2022 BILL CASS MEMORIAL SCHOLARSHIP APPLICATION**

Please complete this application in its entirety. Include any attachments necessary, including a copy of your most recent high school transcript, and a letter of recommendation from at least one high school principal, guidance counselor, or teacher. Return the application no later than

*May 16th, 2022 to:*

BILL CASS SCHOLARSHIP COMMITTEE  
c/o Carter Page, Executive Director  
400 Clubhouse Drive  
Pearl, MS 39208

**STUDENT INFORMATION**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Email: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Social Security # : \_\_\_\_\_

***HIGH SCHOOL INFORMATION:***

High School Attended \_\_\_\_\_

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

Latest Cumulative GPA \_\_\_\_\_ Rank/Class Size \_\_\_\_\_

ACT \_\_\_\_\_ SAT \_\_\_\_\_

***COLLEGE INFORMATION:***

College you plan to attend \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Date entering as a full time student \_\_\_\_\_

Probable Major \_\_\_\_\_



***EXTRA CURRICULAR ACTIVITIES:***

Please list your extra curricular activities under the proper section. You may attach an additional sheet if more space is needed.

❖ School Related Club and Activities:

❖ Interscholastic Athletics:

❖ Non-school Related Clubs and Activities:

❖ Honors and Awards: