MAS 2024 County Employee Scholarship Application

Savanna McCafferty <smccafferty+massup.org@ccsend.com>

Mon 10/16/2023 2:28 PM

To:Lasonia Thompson <ccbenefits@coahomacountyms.gov>



Check out our Website

Check out our Gallery



Empowering County Government Since 1908

Hello LaSonia,

MAS 2024 County Employee Scholarship Program Now Accepting Applications

New-Apply Online

MAS is now accepting applications for the 2024 MAS County Employee Scholarship Program. For the first time, we are excited to introduce an online application option!

Counties will receive up to two \$500 scholarships based on eligibility. Counties receive one scholarship based on their Association membership and one scholarship for MASIT member counties. Scholarships will be awarded based on the applicant's county of permanent residence.

Please share this application with you schools and colleges. You may also direct them to the MAS website for further details.

https://www.mssupervisors.org/scholarship-program

NEW! Apply Online:

Students my now fill out and submit their application online. For more information on how to submit an application online visit the MAS website.

Why Apply Online?

By applying for the MAS Scholarship online, you'll enjoy a streamlined and convenient process that saves you time and effort. Say goodbye to paperwork, mailing, and email errors— our online application ensures instant submission and the security of your information. Additionally, our online applications has automated checks, ensuring that all required information is provided, reducing the chances of errors or missing documents, which will greatly simplify the application process.

Who Can Apply?

Applicants must have an immediate family member (parent, stepparent, grandparent, stepgrandparent, legal guardian or spouse) currently working for or retired from a Mississippi county to be eligible to apply. (Relatives of **elected** county officials are not eligible.)

"County employee" means any person working directly for the county government (not a school district, county hospital or other separate entity).

Eligible:

- · High school seniors
- · Current college students
- County employees taking college courses
- County employees' spouses taking college courses

Non Eligible:

- Dependents of **elected** county officials (current or retired)
- Dependents of teachers, school boards, county-owned hospitals or other non-county government divisions
- · Previous recipients of an MAS scholarship

For more information please click below to be taken to the MAS Website.

MAS 2024 County Employee Scholarship



View Member Services

Learn More on ARPA



Address: 793 North President Street
Jackson, MS 39202

Phone: 601-353-2741 Fax: 601-353-2749

Contact Us







MS Association of Supervisors | 793 N President St, Jackson, MS 39202

<u>Unsubscribe ccbenefits@coahomacountyms.gov</u>

<u>Update Profile | Constant Contact Data Notice</u>

Sent by smccafferty@massup.org powered by





MISSISSIPPI ASSOCIATION OF SUPERVISORS **2024 COUNTY EMPLOYEE SCHOLARSHIP APPLICATION FORM**

Section 1: General Information

Applicant's Full Name:			Sex:
Mailing Address:		County:	
		Zip:Cell:	
Have you previously ap	plied for the MAS County Emp	loyee Scholarship? 🗆 Yes 🗆 No	When?
Were you previously aw	varded an MAS County Employ	/ee Scholarship? ☐ Yes ☐ No V	Vhen?
	Section 2: Spon	sor's Information	
step-grandparent, guare		use or family member (parent, currently employed by or retire-	· · · · · · · · · · · · · · · · · · ·
Sponsor:		County:	
Title/Department:		Relationship to Student:	
Status? Currently Employed Retired Retirement Date:			
Must provide letter from the County verifying employment/retirement of Sponsor.			
Section 3: Academic Information			
Cumulative GPA (curren	t school): Must	r provide proof of GPA on school	letterhead/transcript.
School you plan to atten	nd in Fall 2024:		
☐ Currently Enrolled	Accepted, not Enrolled	☐ Applied, not Accepted	☐ Will Apply
	Section 4: Commun	<u>ity/Civic Involvement</u>	
Please list all school clubs, sports, honor societies, civic or community activities, volunteer projects, and/or employment experience (attach a separate sheet if needed):			
	Section 5: Affirma	tions and Signature	
Initial each statement; si	ign and date below.	-	
The attached essI hereby affirm thIf I am awarded o ottend an Eligible	ay is my own, original work. nat I am not a dependent of an ele a scholarship, I understand I must e School by August 1, 2024 or forf	execute a Statement of Intent expr	essing my intention to
Signature of Applicant		Date	