

## **Aura Neely-Gary Memorial Scholarship**

The Aura Neely-Gary Memorial Scholarship Fund was established in 2007 in memory of Mrs. Gary by her family. Mrs. Gary's strong commitment to education and self-improvement was the impetus for her family's desire to establish this scholarship in her honor.

Mrs. Gary, a Jackson resident and member of Anderson United Methodist Church, was always active in her community. She was a graduate of Jackson State University where she was employed as a counselor in the office of the Dean of Students. She loved working with and training young people.

The family wanted to honor her memory by providing a college scholarship to those whose secondary school education may have been interrupted for various reasons or those who require assistance to continue their education. The fund awards one scholarship annually in the amount of \$2,000.

### **Eligibility**

The Aura Neely-Gary Memorial Scholarship provides an annual scholarship based on both merit and need to a male or female student planning to enter a college or university in Mississippi.

Preference will be given to students who desire to resume their education following a period of personal difficulties. Special consideration will be given for young women who have previously dropped out of school and are now enrolled at a post-secondary institution.

The applicant must demonstrate his or her potential contribution to society based on application materials presented. Demonstrated financial need must be provided via the student's university or college financial aid office.

**How to Apply:** If a student meets the above stated eligibility criteria, he/she must submit the following:

- Complete the Community Foundation of Greater Jackson application form
- Provide a personal statement of interest and need; state how you plan to make a difference in your community.
- Provide a letter of recommendation from an official at your school or a leader in your community.
- Financial aid information verified via the University or College Financial Aid Officer.

### **Selection Criteria:**

The selection committee for the Aura Neely Gary Memorial Scholarship will select finalists who meet the application deadline and stated selection criteria.





# Financial Form

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_

First                      Middle                      Initial      Last

Please complete this form using information from your and your parents' most recent Federal Income Tax Return. If the return for the current year has not yet been filed, estimated numbers may be used.

**Dependent** students please complete both the student and the parent information sections. Students are considered dependent if they are under 24 years of age and are none of the following: (1) a ward of the court; (2) married and living away from your parents; (3) have not been claimed by your parents for two consecutive years and have earned at least \$4,000 in each of those two years; (4) served in the military.

**Independent** students complete only the student information section, Include your information only (and your spouse if you are married), your parents' information is not required.

Financial information provided will remain confidential and be viewed only by Foundation staff and scholarship selection committee members.

I am using actual numbers from my 2009 tax return. ( ) (enclose a copy)

I am using estimated numbers. ( ) (we will ask for verification)

I am: ( ) Dependent (complete both columns) ( ) Independent (student column only)

	<b>Student</b>	<b>Parent</b>	
1. Adjusted gross income	\$ _____	\$ _____	_____
2. Total U.S. income tax paid	\$ _____	\$ _____	_____
3. Income earned from work by:      self	\$ _____	\$ _____	_____
spouse	\$ _____	\$ _____	_____
4. Untaxed income and benefits (Child support, AFDC, ADC, SSI, etc.)	\$ _____	\$ _____	_____
5. Cash, savings, stocks, bonds, CDs, etc.	\$ _____	\$ _____	_____
6. Net value of real estate holdings not used as primary residence, business or farm (market value less mortgage balance)	\$ _____	\$ _____	_____
7. Net value of business or farm property	\$ _____	\$ _____	_____
8. Total number of family members (If you are dependent, your parents' family members. If independent, you, your spouse and children.)	_____		_____
9. Total number of family members who will be attending college at least half-time during the next academic year. (If dependent, your parents' family members. If independent, you, your spouse and children.)	_____		_____
10. List any other sources of aid for which you have been approved (including scholarships and grants, names and amounts):	_____		

Additional information:

Parents' current marital status: ( ) single ( ) married ( ) separated ( ) divorced ( ) widowed

Your current marital status: ( ) single ( ) married ( ) separated ( ) divorced ( ) widowed

If you and your family have unusual circumstances, please explain them below. Examples: tuition expenses at elementary or secondary school; family member recently unemployed; unusual medical expenses not covered by insurance; other circumstances that affect income.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Selection and Certification Sheet

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## Scholarship Selection

### **Aura-Neely Gary Memorial Scholarship Fund**

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#### Publicity

If selected as a scholarship recipient, the applicant's name, hometown, school, field of study, activities, awards/honors and other non-confidential information will be released to the media to publicize the award. The recipient will also be asked to provide a photograph for issuance with the press release(s). Please provide your local media information below.

Primary newspaper: \_\_\_\_\_ Television station: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_

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#### Certification

I (we) certify that all the information in this packet is true and complete to the best of my (our) knowledge. If asked by any authorized official of the Community Foundation of Greater Jackson, I (we) agree to provide documentation for information given on these forms. I (we) realize that failure to comply with a request for further information may prevent the applicant from receiving any aid. All required attachments are included. The applicant certifies that any essays or personal statements attached are his or her own works and, to the best of his or her knowledge, correct. The applicant further grants permission for the Foundation to release non-confidential information to the media should he or she be selected as a scholarship recipient.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent or Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_