

*Academic
Scholarship
Awards*



**Warren & Ericka
Martin Foundation
351 Edgewood Terrace Drive
Jackson, Mississippi 39206
www.martinfoundationms.org**

**Mailing Address:
Post Office Box 1870
Jackson, Mississippi 39215**

**Phone: (769)257-6052
Fax: (769)257-6596
Email: info@martinfoundationms.org**

**ACADEMIC SCHOLARSHIPS AWARDS
APPLICATION**

The Warren & Ericka Martin Foundation provides academic scholarship awards to graduating high school students who plan to attend an accredited 4-year Historically Black College or University in the state of Mississippi. The Martin Foundation Scholars are selected based on academic achievement, extracurricular involvement, and community service. All students must submit a completed application for consideration by the selection committee. Each scholarship award will be in the amount of \$1,000.00. Our academic scholarship awards are competitive and all decisions are final.

**APPLICANT MUST SUBMIT THE FOLLOWING
SUPPORTING MATERIALS WITH THIS APPLICATION:**

- ✓ Official High School Transcript
(3.0 GPA or Higher Required)
- ✓ Official ACT Test Results
(18 Composite Score or Higher Required)
- ✓ Letter of Recommendation
(Teacher, Counselor, or Administrator Required)
- ✓ College Admission / Acceptance Letter
(Historically Black College or University in Mississippi)
- ✓ Personal Statement About Your Career Goals
(1 Page Essay / Typed, Double-Spaced)

ATTENTION:

All students must note that completion of this application does NOT guarantee selection to receive the Academic Scholarship Award. Incomplete applications will NOT be considered.
All application materials listed above must be submitted together in one packet.

SUBMISSION DEADLINE: MARCH 30, 2024

Please note that applications materials received after the submission deadline will NOT be considered for an Academic Scholarship Award. All students will be notified in writing if they are selected to receive an Academic Scholarship Award.

**PLEASE MAIL THIS COMPLETED APPLICATION WITH SUPPORTING MATERIALS TO:
THE MARTIN FOUNDATION
POST OFFICE BOX 1870
JACKSON, MISSISSIPPI 39215**

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Section I: General Information

First Name: _____ Last Name: _____ Middle Initial: _____

Date of Birth: _____ Gender: Male: ☐ Female: ☐ Cell Phone: _____

Email: _____

Parent(s) / Legal Guardian(s) Name: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Parent / Guardian Cell Phone: _____

Email: _____

Section II: Educational Information

High School Attended: _____ Years Attended: _____

School Mailing Address: _____

City: _____ State: _____ Zip Code: _____

School Phone: _____ School Fax: _____

Principal: _____ Guidance Counselor: _____

ACT / SAT Composite Score: _____ Grade Point Average: _____ Class Rank: _____

HBCU College / University Admission – Fall 2023: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

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Section III: Extracurricular Involvement

1) Special Honors, Awards, and/or Recognition:

2) Clubs, Memberships, and/or Organizations:

3) Community Service, Participation, and/or Involvement:

(PLEASE ATTACH ADDITIONAL PAGES IF NECESSARY)

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Section IV: Personal Statement

Please submit a one-page typed essay describing your college and career goals and how you will positively impact your community in the future. The guidelines for the personal statement are as follows:

- One Page in Length (250 – 500) Words
- Double-Spaced, Times New Roman Font
- 12 Point Font Size

Section V: Recommendation Letters

Please submit one (1) current letter of recommendation from either a teacher, counselor, or administrator from your school. The guidelines for the letter of recommendation are as follows:

- Letter of recommendation should be sealed and signed by the individual
- Letters from parents and relatives are not accepted
- All letters must be dated within one (1) month of the Academic Scholarship Awards application

Section VI: Certification

I hereby do certify and affirm the following:

- All information included in this application is accurate and complete to the best of my knowledge.
- I understand and acknowledge that providing false or misleading information in any aspect of this application or any enclosed supporting documentation will disqualify me from the selection process and receiving this academic scholarship award.
- I understand if I am selected for the scholarship and do not enroll in a 4-year college / university, I will not receive the academic scholarship award offered by The Warren & Ericka Martin Foundation, Inc.

Applicant Signature: _____ Date: _____

Parent / Guardian Signature: _____ Date: _____

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