Bottom of Form

Minority Men’s Network Educational Foundation

Ron Marley Memorial Scholarship

**Background:**

The Minority Men’s Network Educational Foundation, a 501(c)(3) not-for-profit organization, awards one or more scholarships annually in the name of the late Mr. Ron Marley who made the first contribution to the scholarship fund. The inaugural year was 2003.

**Amount of Award**: $2000

**Eligibility:**

* Boone County resident
* African-American high school senior with a cumulative GPA of 2.5 or higher
* Accepted for admission to an ACCREDITED POST-SECONDARY EDUCATIONAL INSTITUTION OR PROGRAM.

The successful applicant must demonstrate both scholarship and leadership and be involved in school/community activities. Applicants may also be evaluated on the basis of need.

**How to Apply:**

Please complete the scholarship application form including the name and phone number of at least two references (one academic) that can verify information contained in the application. Supporting documentation is part of the application. Applications are available through the high school guidance office OR application may be downloaded HERE:

[MMNEF-Marley-Scholarship-2021-Application.pdf](https://minoritymensnetwork.org/wp-content/uploads/2019/11/MMNEF-Marley-Scholarship-2020-Application.pdf) (as PDF) OR

[MMNEF-Marley-Scholarship-2021-Application.docx](https://minoritymensnetwork.org/wp-content/uploads/2019/11/MMNEF-Marley-Scholarship-2020-Application.docx) (as Fillable WORD document)

**Application Deadline:   12:00 Midnight, March 8, 2021**

(*Applications received after the deadline will not be considered)*

For More Information Contact:

Dr. Wiley A. Miller - E-mail: [MillerWi@missouri.edu](file:///C:\Users\15738\Documents\MMN\Educational%20Foundation\2021%20Scholarships\MillerWi@missouri.edu) or

Mr. Steve Calloway – E-mail: [SteveC6393@mchsi.com](mailto:SteveC6393@mchsi.com)

**Minority Men’s Network Educational Foundation**

**Ron Marley Memorial Scholarship**

**2021 APPLICATION**

*Please note that to consider your application, the Scholarship Committee requires a* ***fully completed*** *application form from the applicant. Please respond to all questions or items on the application form. If there are questions or items that do not apply to you, please respond with “NA.” If there are other reasons for a lack of response to a question or item, the Committee requires a very brief, but logical explanation on a separate sheet of paper. Please use type or machine print if at all possible.*

**Application Deadline:**  March 8, 2021

**Scholarship Amount:** $2,000

Please indicate the high school that you attend:

Battle High Hickman High

Douglass High Rock Bridge High

Applicant’s Name

Last First Middle Initial or Name

Residential Address

Number and Street

City or Town Zip Code

Telephone Contact

Residential Number Cell Phone Number

Your E-Mail Address

Name of high school counselor: Ms., Mr., Dr. *(circle)* Last Name First Name

Counselor’s Office Phone #

Expected date of High School Graduation

Month Year

Current Grade Point Average\* (GPA)

Most Recent ACT/SAT Score(s)

*\*Please note: a copy of your most recent high school transcript must be attached to or included with this application.*

To be selected as a recipient of our Marley Scholarship, you must have applied to and been accepted for enrollment by least at one college, university, community college, or other post-secondary educational institution or program. Please list the schools to which you have applied. If you have already been accepted for fall enrollment by the listed school(s), please attach a copy of your acceptance letter(s).

Accepted

Name of School *Please indicate “Yes” or “No”*

In the space below, please list and briefly describe the school and community **involvements and activities** in which you have participated over the past several years. Include any extra-curricular school activities in which you participate or have recently participated. This list should include any community activities or work for which you currently volunteer or have volunteered in the past four years. You are encouraged to attach copies of awards and citations that verify your participation. (Use additional sheets as necessary).

Below, please list any school or community **leadership** positions you hold or have held during the past four years. (*Examples are: Officer positions such as President, Vice-President, Secretary, or Treasurer. Other examples are roles you might have filled such as Coordinator, Project Leader, Chairperson, etc.*) Be sure to consider any leadership positions in groups like the Boy Scouts, Girl Scouts, church, etc. (Use additional sheets as necessary)

Below, please briefly describe your academic and professional goals. (Use additional sheets as necessary)

Based upon your family’s most recently filed federal income tax return, please indicate your family’s adjusted gross income by a check in the appropriate line below.

Under $30,000

$30,001 – 50,000

$50,001 – 70,000

$70,001 – 100,000

$100,001 – 130,00

Over $130,000

Please give the ages of your **siblings** who live with you in your household. (*Example: 20, 12, 9*)

Do you have siblings who are attending college? Yes No

What college(s) do they attend?

When evaluating your application, is there any special need on your part or any special financial hardship that you would like to have the scholarship committee consider? If so, please briefly describe below.

Which one of the following is most true for you?

I live with both of **my parents** in the same household.

I live in a household with my **father**.

I live in a household with my **mother**.

I live in a household headed by one or two **grandparents**.

I live in a household headed by **another relative**.

I live in a household headed by an unrelated **guardian**.

My **parents live in different households**, and I

live near equally with both.

Please attach your resume to this application.

Please attach your photograph, in business attire (such as a senior class picture), to this application.

Please list your **REFERENCES:**

School Personnel:

Name Title (Teacher, Counselor, Principal, etc.)

Address

E-mail Address Phone

Other Reference:

Name Relation to you (supervisor, parental friend, etc.)

Address

E-mail Address Phone

Below, please sign your application form. Then, have it signed by one of your parents or guardians and by your school counselor.

Signature of student applicant

Name of Parent or Guardian

Please Print Name Signature

School Counselor

Please Print Name Signature

Date Application Completed

Month Day Year

Information and materials provided on or with this application will be kept confidential and will be made available only to official members of the Minority Men’s Network solely for the purpose of selecting recipients of the Marley Scholarship offered by the Minority Men’s Network. After an applicant is selected to become a scholarship recipient, that applicant will be contacted by the Minority Men’s Network seeking permission to release certain limited information about the recipient for the purpose of publicizing his or her achievement (being selected a Marley scholarship winner) or for publicizing our scholarship program.

Please PRINT the completed application form and mail it, along with all requested supporting documents, to:

**Minority Men’s Network**

**P.O. Box 1839**

**Columbia, MO 65205-1839**

Alternatively, you may give the completed application to your school counselor for pickup by the Minority Men’s Network.

**Once again, to be considered, completed application and all supporting documentation must be received by Monday, March 8, 2021.**