



**GENERAL SCHOLARSHIP
DEPENDENT CHILD OF FULL-TIME EMPLOYEE**

RETURN THIS FORM TO:
Financial Aid Office
4975 Hwy 51 N
Senatobia, MS 38668
Phone: 662-562-3271
www.northwestms.edu

Employee's Name _____

ID No. _____

Student's Name _____

Student ID No. _____

Dependent children of full-time employees may qualify for a General Scholarship to be used only at Northwest for tuition and fees. It does not include eBook fees. The dependent must:

- Be under the age of 24
- Have less than 96 hours attempted
- Have completed the FAFSA (regardless of whether they will qualify for a Pell Grant)
- Must be maintaining a 2.0 cumulative grade point average and be in good standing. (If student has a habit of withdrawing or not attending classes, the scholarship will be denied. The student CANNOT be on final probation!!!)

Please indicate your Campus:

Senatobia Desoto Oxford

Please indicate the Semester:

Fall 20____ Spring 20____ Summer 20____ Winter 20____

I hereby certify that I am a full-time employee of Northwest Mississippi Community College. I also certify that I understand the requirements of this scholarship as outlined above.

Employee's Signature _____ Date _____

This form must be submitted to the Financial Aid Office prior to Registration.
It can be faxed to 662-562-3915.