



Pomonkey High School Alumni Association, Inc.

3395 Metropolitan Church Road • Indian Head, Maryland 20640

Mailing Address: P.O. Box 192 • Bryans Road, Maryland 20616

"Home of the Roaring Tigers"



Philip Thomas, *President*
Doris Mason, *Vice-President*
Vivian Harris, *Secretary*
V. Elnora Milstead, *Treasurer*
Sheila Myers, *Administrative Assistant*

February 22, 2022

Ms. Christina Jones, Counselor
North Point High School
2500 Davis Road
Waldorf, MD 20603

Dear Ms. Jones,

Each year since 1989, the Pomonkey High School Alumni Association, Inc. has been awarding scholarships in the amount of \$500.00 each to four graduating seniors who are interested in continuing their education beyond high school. There are two requirements for applicants: 1) the applicant must be a direct descendent (of mother, father, grandparent, or great grandparent) of a financial member of the Alumni Association (membership dues must be paid through the previous 3 year), and 2) the student must have a GPA of "3.0" or above.

An application has been attached and can be reproduced as needed. The completed application must be postmarked by April 22, 2022, and should be mailed to:

Pomonkey High School Alumni Association
Attention: Vera W. Merritt, Scholarship Committee
P.O. Box 192
Bryans Road, MD 20616

Or emailed to: ywmerit231@verizon.net

An official transcript must be submitted by the school to the association.

The applicants will be notified by the committee no later than May 18, 2022 of the selections. If there are any questions, please feel free to contact me at the email address above.

As always, we would appreciate your help by making this information available to your seniors and counselors.

Sincerely yours,
Vera W. Merritt
Vera W. Merritt, Chairperson
PHS Scholarship Committee

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POMONKEY HIGH SCHOOL ALUMNI SCHOLARSHIP APPLICATION

Please Print Clearly.

Name _____ Date of Application _____

Address (Mailing) _____

City _____ State _____ Zip _____

Home Phone Number () _____ Cell () _____

Student's Phone Number (If different from above.) _____

Date of Birth _____ High School you attend _____

Student's Email Address: _____

Name of Parent/Guardian _____

Address (Mailing) _____

City _____ State _____ Zip _____

Telephone Number () _____ Cell () _____

Name of PHS Alumnus for which you are an heir: _____

If alumnus is a female, please state her maiden name _____

Year(s) attended Pomonkey High School: 19 ___ to 19 ___ Telephone Number _____

List school and community activities in which you are currently involved. (If more space is needed, please continue on the reverse side).

1. _____
2. _____

Name of institution of advanced education in which you plan to attend or have been accepted. (If more space is needed, please continue on the reverse side.).

Name _____

Address _____

City _____ State _____ Zip _____

Is this your first application to Pomonkey High School Alumni Scholarship Fund? Yes _____ No _____

Are you a recipient of any other scholarships? Yes _____ No _____ If yes, name source and amount.

Source: _____ \$ _____

Source: _____ \$ _____

Please have your school submit an official transcript. Mail or email this completed application (providing you meet the requirements stated above.). The deadline for receiving your application and transcript is Friday, April 22, 2022.

Please mail your application to: PHSAA Scholarship Committee
Attn: Vera W. Merritt, Chairperson
P.O. Box 192
Bryans Road, MD 20616

Or email to: vwmerit231@verizon.net