



Mississippi Organ Recovery Agency

Scholarship Application

ATTACH THIS FORM WITH YOUR ESSAY and TWO LETTERS OF RECOMMENDATIONS

High School you attend _____

Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

Phone: cell # _____ home # _____ ACT Score _____

Email Address _____

Parent/Guardian _____ Parent/Guardian Cell # _____

College or University you plan to attend _____

Major _____

List any volunteer and community work, academic achievements, honors, recognitions, awards, and/or leadership positions. (Use additional pages if necessary) **Resume will be accepted.**

Multiple horizontal lines for writing the list of volunteer and community work, academic achievements, honors, recognitions, awards, and/or leadership positions.