

## **MEMTA**

## Application for Edna Barnes Memorial Scholarship (EMT - Basic) Sponsored by MEMTA

## **Information and Instructions for application:**

- A completed scholarship form and requested material must be postmarked on or before the May 31<sup>st</sup> of each year.
- A scholarship for the total sum of \$750.00 will be awarded to the selected person on July 15<sup>th</sup> of each year upon acceptance into a approved course.
- Three letters of recommendations should accompany each application.
- High school transcript shall be provided with application.
- Those eligible for the scholarship: minimum high school graduate and first time EMT Basic Enrollment. NOTE: Failure to attend the EMT course by the scholarship recipient shall cause the scholarship review committee to revoke the scholarship.

\*\* A copy of the EMT completion certificate shall be sent to the Mississippi EMT Association\*\*

Personal Information				
First Name:	Middle: Last:			
Address:				
City:	State:		Zip:	
Home Phone:	Cell:	Work:	DO	B:
Contact Person	Phone Number:			
Address:				
Academic Information				
High School:				
Address:				
City:	State:		Zip:	
Graduation Year:	State: High School Average: _		ACT Score	SAT Score:
<b>Employment History</b>				
	nd location (if this does not app		- •	and schools up to 3)
2				
3				
	nformation on back of this for		l.	
Attach a fifty word	essay on why you have choses	n a career ir	EMS as your profe	ssion.
•	wards and / or honors) you wo		• •	
- 110vide any data (a	wards and / or nonors, you wo	raid like to s	mare with the reviet	w committee.
(Print) Applicant Name	(Sign) Applicar	nt Name	Date	

Please complete and mail to the following address:

MEMTA/ Edna Barnes Scholarship c/o Judy Davis Box 61 Stevens Rd. Waynesboro, MS. 39367