

NORTH MISSISSIPPI CONFERENCE LAY ORGANIZATION  
AFRICAN METHODIST EPISCOPAL CHURCH



*The Brox-Grant Foundation Scholarship*

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The North Mississippi Conference Lay Organization established the Brox-Grant Scholarship in 2009, as a tribute to our forefathers Norman Romell Brox and Robert "Bob" Grant. The scholarship is presented to a graduating high school senior who plans to attend college. The purpose of the scholarship is to assist high school graduates who are members of the African Methodist Episcopal Church in the North Mississippi Conference in their pursuit of a college degree.

Eligibility Requirements

1. A member of the African Methodist Episcopal Church ( in good and regular standing)
2. Pursue an Associate or Bachelor's Degree
3. Must enter college in the fall of 2014

The Selection Process

The Scholarship committee will review all completed applications. Applicants will be judged on their academic performance, financial need, leadership qualities, extracurricular involvement, community and church activities. The local lay president of the church will be notified of the winners in that church. The winners will be announced during Lay participation night of the Annual Conference.

Application Requirements

An official high school transcript

A minimum of two letters of recommendation and a maximum of three letters of recommendation.  
(one must be from the local Lay President or local Lay officer, others can be pastor, church school teacher, community leader or teacher)

An essay of at least 300 words and not more than 800 words telling about your future.

Mail all completed applications to

Mary Kenerson  
4284 Becky Sue Cv  
Olive Branch, MS 38654

All completed application must be received by September 1, 2014.



IV: COLLEGE OR UNIVERSITY YOU PLAN TO ATTEND

\_\_\_\_\_  
Name and Address

\_\_\_\_\_  
Planned Major

\_\_\_\_\_  
Annual Tuition

V: ACHIEVEMENTS:

*(List extra curricular, civic and church involvement, work, scholarship or other awards )*

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VI: FAMILY INFORMATION

\_\_\_\_\_  
Name of Parent

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone#

\_\_\_\_\_  
Number of Siblings

\_\_\_\_\_  
Family Annual Income

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date