



# Michelle Lynn Holsey Foundation

## NYCHA Scholarship Application

**Purpose:** The purpose of the Michelle Lynn Holsey Foundation College Scholarship Award is to assist students who are seeking to further their education. Two \$2,000 scholarships will be awarded at the **2025 NYCHA Youth World Finals in Ft. Worth, Texas. The recipient will be notified before the Youth World banquet.**

The eligibility requirements are as follows:

- ◆ **Be an NCHA member attending college beginning in the Fall of 2025.**
- ◆ **Be accepted by any state supported college, university, community college, or trade school nationwide.**
- ◆ **Be a U.S. citizen.**

**Non-discrimination Statement:** The MLH Foundation is fair and equal in all its scholarship processes for all persons without regard to race, color, religion, sex, national origin, disability, or any other characteristic protected by law.

**Application Submission Instruction:** In order to be eligible for consideration, your scholarship application **must include:**

- ◆ **Copy of parents most recent tax return, only pages 1 & 2, schedules C, E , & F and form 4797.**
- ◆ **Complete Application & Scholarship Agreement, typed or printed legibly in blue or black ink.  
Essay must be typewritten, explaining your educational goals.**
- ◆ **Counselor must attach the applicant’s academic transcript and test scores.**
- ◆ **Copy of acceptance letter from the college, university, community college or trade school that you will be attending.**
- ◆ **Current and accurate contact information.**
- ◆ **Signatures where indicated on the application.**

**All applications must be received in the MLHF office by 5pm  
4/7/25. Mailing address: P.O. Box 652 Crockett, TX. 75835.  
Physical Address: 1200 South 4th St. Crockett, TX. 75835**

Applicant’s name:

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Applicant’s email:

Applicant’s phone #:

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High School Graduating from:

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Planned Course of Study:

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College you have been accepted to:

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Are you a U.S. Citizen:

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## NYCHA Scholarship Agreement

- ◆ I will ensure the Michelle Lynn Holsey Foundation has the correct name and address of the college, university, community college, or trade school I will be attending by May 23, 2025.
- ◆ I will be a full-time student, as defined by my educational institution.
- ◆ I will attend a state-supported college, university, community college or trade school.
- ◆ I authorize the Michelle Lynn Holsey Foundation to use all information (other than financial information) that the Foundation obtains or receives as a part of the scholarship award program, for any reason, including but not limited to, public relations announcements.
- ◆ I will keep the Michelle Lynn Holsey Foundation informed of my current home and school addresses and contact information.
- ◆ I will practice good behavior and avoid any disciplinary action by any educational, law enforcement or affiliated agency.
- ◆ I understand that the Michelle Lynn Holsey Foundation reserves the right to request more information and materials at any time.
- ◆ I understand that my failure to complete any of the above requirements may result in the withdrawal of my scholarship.

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**Applicant's Signature and Date**

**Michelle Lynn Holsey Foundation  
NYCHA Scholarship Application**

**Personal Information**

**Father's Name:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Occupation / Employer:** \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Occupation / Employer:** \_\_\_\_\_

**Step-Parent's or Guardian's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Occupation / Employer:** \_\_\_\_\_

**Annual Household Income:** \_\_\_\_\_

Number of other family members in your household attending college, at least part-time:

\_\_\_\_\_

List all brothers, sisters, stepbrothers, and stepsisters in your household, their ages, and if they are dependent upon the family for support.

<b>Name</b>	<b>Relationship</b>	<b>Age</b>	<b>Dependent upon family</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Educational Data**

**High School Attended:** \_\_\_\_\_

**Scheduled date of high school graduation:** \_\_\_\_\_

**Counselor's name:** \_\_\_\_\_

**SAT Critical Reading Score:** \_\_\_\_\_

**SAT Math Score:** \_\_\_\_\_

**SAT Writing Score:** \_\_\_\_\_ **SAT Composite Score:** \_\_\_\_\_

**ACT Composite:** \_\_\_\_\_

**Class Rank:** \_\_\_\_\_ **Class Size:** \_\_\_\_\_

To what colleges, universities, or trade school have you or do you plan to apply? Please include copies of all acceptance letters.

\_\_\_\_\_

