

The Cecil Jones Memorial Higher Education in Healthcare Scholarship

The **Cecil Jones Memorial Higher Education in Healthcare Scholarship** is provided by Dr. Michael L. Jones, Leake County, Mississippi native and 1995 graduate of South Leake High School, in memory of his father, Mr. Cecil Jones (September 3, 1953 – October 1, 2014), who never had the opportunity to achieve a high school diploma or college degree. He encouraged his children to work hard and achieve an education. Mr. Cecil Jones worked for many years in Leake County as a bus driver and mechanic for Friends of Children of Mississippi, Incorporated (Headstart), for which he is most known for. He also served at other places of employment in the county during his life. His son, Dr. Michael L. Jones, Registered Nurse, Healthcare Administrator, Educator, and Researcher wishes to pay it forward in his father's name to one (1) deserving female and one (1) deserving male graduate of Leake County High School (formerly South Leake High School), who seeks to major in the field of healthcare.

Each scholarship recipient will receive the sum of \$500. In addition to the monetary award, each recipient will be featured on Dr. Jones' blog, "*Dr. Mike Speaks*" (www.drmikespeaks.net) and will have access to Dr. Jones for mentorship for the duration of the recipient's educational journey in a healthcare major. Recipients will be notified by mail and by email no later than Friday, May 6, 2022!

To be eligible, the applicant must:

- Plan to major in the field of healthcare
- Have a GPA of 3.0 or higher
 - *Leake County High School Guidance Counselor must validate GPA on the application form.*
- Be a graduating senior of Leake County High School (Walnut Grove, Mississippi)
- Submit a 1-2 page typed essay, which includes the following:
 - Brief discussion on the healthcare major, which should include why that particular major was chosen
 - Brief discussion on the applicant's 5–10 year goals
 - Brief discussion on how the scholarship will be utilized
 - Any other pertinent information the applicant would like to disclose
- Complete the application form on the next page.

Application due date:

*The completed application and essay must be submitted to Dr. Jones at michaelj4551@aol.com no later than **Friday, April 22, 2022**. Applications will not be accepted without your GPA and the Counselor's signature!*

Application Form

Student Section:

Last Name: _____ First Name: _____ MI: _____

Gender: _____ Age: _____ Race/Ethnicity: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Phone: _____

Parent's Name(s): _____

Planned College Healthcare Major: _____

Extracurricular Activities: _____

Honors and/or Awards: _____

Counselor Section:

Student GPA: _____ Counselor Name: _____

Counselor Signature: _____ Date: _____

Notes to Student:

Should you have questions, please reach out to Dr. Michael L. Jones at the following:

Michael L. Jones, PhD, MBA, RN

Email: michaelj4551@aol.com

Phone: (601) 594-2387

*Please submit completed applications and essays no later than **Friday, April 22, 2022**, to the following email address: michaelj4551@aol.com*