Mississippi Student Financial Aid

3825 Ridgewood Road, Jackson, MS 39211-6453
1-800-327-2980/601-432-6997

HELP SCHOLARSHIP WORKSHEET

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Student Full Name Social Security Number

The following information is needed to complete our evaluation of your eligibility for the HELP Scholarship.

1. My (the student) family members consist of the following:

	Name	Relationship	Age
Ex:	**Mary Doe**	**Mother**	**42**

Mail this form to the address above. **Please do not FAX this information.**