



**Alcorn State University National Alumni Association**  
**Metro-Jackson Alcorn Alumni Chapter**  
**P.O. Box 9391**  
**Jackson, MS 39286**  
**47th Annual Mid-Winter Conference**  
**March 14-17, 2024**



**“Alcornites: Boldly and Bravely Bearing Thy Standard on to Victory”**

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## MEMORIAL REPORT FORM

Chapter Name: \_\_\_\_\_

Chapter President: \_\_\_\_\_

Name	Date Deceased	Class Year	City & State of Deceased	Name, Phone No. & Email of Person Reporting

Please submit this form and pictures by **2/28/2024**.

Go to <https://metrojxnalcornites.com/> to download and complete this fillable form, save it as a pdf, and email it to [mwcmemorial2024@gmail.com](mailto:mwcmemorial2024@gmail.com). Subject Line: Memorial Report

OR

Mail completed form to: Metro-Jackson Alcorn Alumni Chapter, Inc.  
 c/o Memorial Committee  
 P.O. Box 9391  
 Jackson, MS 39286

Questions and concerns should be sent to [mwcmemorial2024@gmail.com](mailto:mwcmemorial2024@gmail.com)

For Committee Use Only	
Date Received: _____	Initials: _____