# NAACP 2024 Scholarship Instructions

The NAACP Scholarship Fund is established to assist and encourage young students who are about to enter an institution of higher learning. Students must reside and attend school in Genesee County.

To be eligible to apply, the student must be a U.S. citizen and a graduating senior of an accredited high school. His or her academic record will be one of the selection criteria. Membership in the NAACP is desirable, but <u>not</u> a requirement.

To complete the application and in addition to other information, students will be asked for: a brief essay, evidence of community service, and for some of the special qualities or experiences that have shaped his/her life. In addition, three (3) references should also accompany the application.

**Application Deadline: February 9, 2024** 

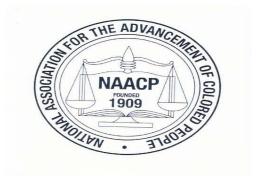
Completed Applications must be TYPED and along with requested documentation, submitted in one of three ways:

- 1. Scanned and emailed (preferred)
- 2. Placed in NAACP Branch Office Drop Box
- 3. Mailed or Postparked by Deadline: (Please consider mailing/delivery delays)

#### Please NOTE: Handwritten Applications will not be Accepted

Candidates will be notified by email and confirmed to appear virtually before an interview panel scheduled for **February 16, 2024.** 

Individuals receiving an award will be notified by email on or before February 23, 2024. The awardees will be asked to attend or have their parent/guardian attend the 2024 NAACP Freedom Fund Awards Celebration - TBA. The "pledge" for the award will be presented at the ceremony. Please NOTE: (1). Before one can receive the award, he or she must have proof of being accepted by an accredited college, university, or technical school. (2). The amount of the grant may vary in accordance with the funds and sources available.



The NAACP is an equal opportunity agency, and does not discriminate on the basis of race, gender, religious affiliation or any other biased classification.

# FOR OFFICIAL USE ONLY DATE RECEIVED

| STUDENT'S NAME |
|----------------|
|                |
|                |
| HIGH SCHOOL    |

# FLINT BRANCH OF THE NAACP

Serving Genesee County Frances Gilcreast, President

# SCHOLARSHIP APPLICATION

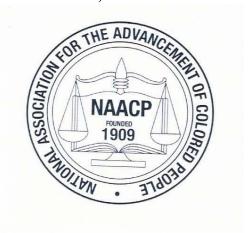
# **DEADLINE: February 9, 2024**

**Submit Applications to:** 

Email: Ella Greene-Moton – emgreemo@vahoo.com

Hand Delivery: NAACP Branch Office - Drop Box

Mail: NAACP Scholarship Committee 3455 Lippincott Blvd. Flint, MI 48507



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#### SCHOLARSHIP APPLICATION INSTRUCTIONS

Please read the following information before completing this application.

#### **ELIGIBILTY REQUIREMENTS**

Applicant must:

- be a graduating senior from a Flint or Genesee County high school.
- be a United States citizen that resides in Genesee County.
- have a cumulative GPA of 2.5 (C+) or better
- must be accepted or anticipate being accepted to an accredited college/university or tradeschool.

  \*NAACP membership and participation is highly desirable

| AWARD CATEGORIES  Please Check One Category Only |                                 |  |  |  |  |
|--|---------------------------------|--|--|--|--|
| \$1000 - NEED BASED                              | \$1000 - ACADEMIC               |  |  |  |  |
| \$1000 - COMMUNITY SERVICE                       | \$500 - NON-TRADITIONAL STUDENT |  |  |  |  |

#### REQUIRED MATERIAL

Please submit the following with your **TYPED** application:

- Three (3) letters of recommendation (other than relatives)
  - o One (1) academic reference
  - One (1) personal character reference
  - One (1) community service reference Advisor/Coordinator
- Current official high school transcript (sealed envelope)
- Copy of application for admission or letter of acceptance from college/university
- One page essay (see last page)
- Copy of NAACP membership card or receipt of membership if available

| Three Recommendations Official Transcript  | College/University Acceptance Letter           |
|--|--|
| Verification of NAACP Membership One P   | age Essay Financial Information                |
| I certify that I am a high school senior and the information of my knowledge. By signing this application, I grant I name and/or image in conjunction with the Freedom F | The NAACP-Flint Branch the right to publish my |
| Student Signature  | Datel guardian signature is also required.     |
| Parent Signature   | Date   |

# PERSONAL INFORMATION

#### APPLICATION MUST BE TYPED

| <b>1.</b> Name:          |               |                  |                   |                        |              |
|--------------------------|---------------|------------------|-------------------|------------------------|--------------|
| Last                     |               | First            |                   | Mid                    | ldle Initial |
| <b>2.</b> Permanent Hom  | e Address:    |                  |                   |                        |              |
|                          | N             | umber            | Street            |                        | Apr. #       |
| City                     | State         | Zip Code         | Area Code         | Telephone              |              |
| Email Address_           |               |                  |                   |                        |              |
| 3. U.S. Citizen          | YesNO         | If you are NOT a | uS Citizen, Do NO | T continue with this a | pplication   |
| 4. Date of Birth         |               |                  | . Birthplace      |                        |              |
| N                        | Month/Day/Yo  | ear              |                   | City/State/Cou         | ıntry        |
| 6. Current High Sc       | hool          |                  |                   |                        |              |
|                          |               |                  |                   |                        |              |
| 7. Counselor             |               |                  | Teleph            | none No                |              |
|                          |               |                  |                   |                        |              |
| 3. Colleges Applie       | d to:         |                  |                   |                        |              |
| A                        |               |                  | Accepte           | ed?Yes                 | _No          |
| В                        |               |                  | Accepte           | ed?Yes                 | _No          |
| C                        |               |                  | Accepte           | ed?Yes                 | No           |
| <b>9.</b> Have you decid | ed which coll | lege you will a  | attend?           |                        |              |
| If yes, give             | name          |                  |                   |                        |              |
| Date of enr              | ollment:      | In               | tended Major: _   |                        |              |
| Career Goa               | 1:            |                  |                   |                        |              |

# PARENT INFORMATION

| Last Name                 | First       |               | Middle Initial |
|---------------------------|-------------|---------------|----------------|
| Mailing Address           |             |               |                |
| Number                    | Street      |               | Apt. #         |
| Home phone: ()            |             | Work phone: ( | )              |
| Occupation/Title:         |             |               |                |
| Employer:                 |             |               |                |
| Business Address:         |             |               |                |
| City                      |             | State         | Zip            |
| Mother Guardian (check    | one)        |               |                |
| Last Name                 | First       |               | Middle Initia  |
| Mailing Address           | Street      |               | Apt. #         |
|                           |             |               |                |
| Home phone: ()            |             | Work phone: ( | )              |
| Occupation/Title:         |             |               |                |
| Employer:                 |             |               |                |
| Business Address:         |             |               |                |
| City                      |             | State         | Z              |
| a. With whom do you live? |             |               |                |
|                           | Last Name   |               | First          |
|                           | East Ivanie |               |                |

NEED BASED AWARD
Complete ONLY if you are applying for the Need Based Award

# FINANCIAL INFORMATION

| 13. Check Gross Yearly Family Income  |
|---|
| \$\begin{array}{ c c c c c c c c c c c c c c c c c c c  |
| 14a. How many family members currently reside in your home?   |
| 14b. How many family members in the household are currently attending college?  |
| <b>14c.</b> How much financial support do you expect your family to contribute your first of college year?  |
| <b>14d.</b> Approximately how much will it cost per year for you to attend college?   |
| TuitionBooksRoom and BoardOther ExpensesTransportationTotal Cost  |
| 14e. Of the above total cost, how much financial assistance will you require?   |
| 14f. Have you received any other scholarships?YesNo  If yes, please list the source and amount below.  SOURCE AMOUNT PERIOD OF AWARD  (i.e., one-time only, annual, etc.) |
| 14g. How do you plan to secure the remaining financial assistance needed?   |
|   |

Please thoughtfully consider and answer the following questions on additional paper if needed. **Answers must be typed.** 

**15.** What is the most meaningful book you've read recently? Why was it meaningful to you?

**16.** What do you consider the most compelling problem(s) facing youth in the 21<sup>st</sup> Century? What would you do to make a difference? (Explain)

## **ACADEMIC HONORS**

| <b>17</b> . | Please l  | list anv | academic  | honors  | vou have | received in    | high school.   |
|-------------|-----------|----------|-----------|---------|----------|----------------|----------------|
| 1/•         | I ICasc I | ust any  | acaucinic | HUHUI 5 | you nave | i ccci v cu ii | i mign school. |

## **ACTIVITIES**

18. Attach a list of all the extracurricular activities (church, school, and community) that you have been involved in over the past two years.

## **LEADERSHIP**

19. Please list the leadership roles or positions you have held during high school.

# **ESSAY**

20. What suggestion or suggestions would you make to Governor Gretchen Whitmer to ensure a quality education for all in the 21st Century and considering the COVID-19 Pandemic?