**NCCBSBM Scholarship Application**

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Last Name First Name Middle Initial

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Street Address

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City State Zip County

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Cell Phone Number Home Phone Number

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Date of Birth (MM/DD/YY) Place of Birth Email

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Parents or Guardian’s Name

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Street Address

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City State Zip

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Cell Phone Number Home Phone Number

Total Number in Family: \_\_\_\_ Total Number of Dependents \_\_\_\_ Are you a U.S. Citizen? \_\_\_\_\_ (Yes/No)

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High School Name

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Street Address

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City State Zip

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School Counselor Email Phone Number

Are you a senior in High School? Yes No Class Rank / GPA \_\_\_\_\_\_\_\_\_\_\_

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College/University Name

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Street Address

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City State Zip

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School Email Phone Number

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Number of years attending College/University Area of Study: (Major/Minor)

(2 or 4Yrs)

Current GPA (if enrolled) \_\_\_\_\_\_\_\_\_ Marital Status: \_\_\_\_\_\_\_\_\_\_\_\_ Gender: Male Female

How did you find out about this Scholarship? Friend NCCBSBM Website Other

List at least two individuals *(School/Guidance Counselor, College Instructors, Employers, Community Leaders, etc*.) who have provided letters of recommendation (*which are to be included with this application*).

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1. Name / Title

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Street Address

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Phone Number Email

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2. Name / Title

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Street Address

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Phone Number Email

Enclose an official Certified Copy of High School Transcript or verification of enrollment from a College/University.

Write a brief biographical sketch, including a list of personal goals and a statement summarizing why you need the NCCBSBM Scholarship to facilitate a college education (200 words or less).

List awards (local, state, or national), scholastic involvement, extra curriculum activities, community involvement, and any offices that you have held; (summarize your achievement(s) within the organization).

List your place of work, duties, month(s), years worked and include any volunteer experiences with total volunteer hours served (attach sheet if necessary).

AGREEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that false or misleading information given in my application or interview(s) may result in disqualification. I authorize investigation of all statements contained within this application for the NCCBSBM Scholarship as may be necessary.

I understand that if I am selected, I am invited to attend the NC Black Caucus of Black School Board Members Fall retreat & Issues Forum held in Raleigh During the month of October.

I further understand that upon confirmation of enrollment and attendance at a two or four-year College, the scholarship funds will be released to me.

**I understand that ONLY applications selected for interviews will be notified.**

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Applicant Signature Date

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Parents/Guardian Signature Date

**REQUIRED ATTACHMENTS:**

• High School Transcripts • Verification of Enrollment Form • Biographical Sketch, • 2 Reference Letters

All correspondence must be typed and submitted to scholarship chairperson by deadline.

Application Submission Deadline: April 20, 2023

**SCHOLARSHIP CHAIRPERSON**:

Rev. Dr. Marjorie Edwards | Email: [mabenana46@yahoo.com](mailto:mabenana46@yahoo.com)

Home Phone: (252) 585-2281 | (Cell Phone: (252) 578-7837

To be announced at recipient’s High School Awards Day.

Scholarship Application Check List

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Applicant Signature Date

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County College/University

\_\_\_\_\_ Application Complete & Received by Deadline **(April 20, 2023)**

\_\_\_\_\_ Certified High School Transcripts

\_\_\_\_\_ Verification of Enrollment Forms – College/University Application

\_\_\_\_\_ Biographical Sketch

\_\_\_\_\_ Achievement Section

\_\_\_\_\_ Employment History

\_\_\_\_\_ 2 Reference Letters

\_\_\_\_\_ Signature/Date

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Referred by Financial School Board Member

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School District

OFFICAL SECTION ONLY

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Date Received Amount Awarded Verified by NCCBSBM Official

**North Carolina Caucus of Black School Board Members**

**Scholarship Program**

**CRITERIA:**

Student must be a graduating high school senior and demonstrated intention to continue their education at a two-year or four-year college or university. Consideration will be given to academic achievement, financial need, and the student’s community service record.

**GUIDELINES:**

Scholarships will be awarded on a one-time basis, based on available funds, and disbursed for payment to the college or university of the student’s attendance. It is the responsibility of the recipient to notify the college or university of choice about the award. The award will be made payable to the college or university of the recipient’s choice upon receipt of an official letter (with the college/university seal) from the Registrar’s office confirming the recipient’s enrollment as a fulltime student. The official letter should be sent to the attention of:

Mr. O. D. Sykes

Treasurer

Post Office Box 484

Weldon, NC 27890

**AMOUNT:**

Each scholarship awarded (range: $500 - $1,000) will be based on available funds.

**DEADLINE:**

The application deadline for 2023 is April 20, 2023. The deadline is date after which application will no longer be accepted. We will use the timestamp date showing date and time sent with emailed entries.

SCHOLARSHIP CHAIRPERSON:

Rev. Dr. Marjorie Edwards

Email: mabenana46@yahoo.com

Home Phone: (252) 585-2281 | (Cell Phone: (252) 578-7837

*All criteria MUST be met before any application will be considered.*