Richmond/Madison County NAACP Scholarship Requirements Richmond/Madison County NAACP Branch PO Box 105 Richmond, KY 40476-0105

PPURPOSE: The Richmond/Madison County NAACP established a Scholarship Fund to provide financial assistance for NAACP members and Young Adults with the community, who are pursuing a degree at a two or four year college, university, technical or vocational school.

ELIGIBILITY:

- 1. Open to Richmond/Madison County residents that are high school seniors, college, university, and technical or vocational school attendees.
 - a. Preference will be given to those students who have the greatest financial need.
 - b. Additional preference will be given to NAACP member in good standing and participating in the Richmond/Madison County NAACP Branch.
- 2. All applicants must submit an application for membership to the Richmond/Madison County NAACP Branch, if not a current member, at the time of application for the scholarship.
- 3. All recipients must have a cumulative High School or college GPA of 2.5 (based on a 4 point scale) or higher.
- 4. All recipients must plan to enroll in the college, university, technical or vocational school of their choice on a full time basis.
- 5. All recipients can apply annually but may only receive a maximum of up to 4 awards.

APPLICATION:

- 1. All students must submit an application to be considered for a Scholarship award.
- 2. Deadline for submission of applications will be **April 15th** of each year.
- 3. In additional to the supplied application form, the following should be submitted by all applicants:
 - a. Official copy of high school or college transcript
 - b. One page typed essay of your personal educational/vocational goals. Also include any other information that would lend support to your application, i.e. community activities, volunteer work and clubs.
 - c. High school students letter from counselor stating you have met all requirements for graduation.
 - d. College, university, technical or vocational students letter from advisor stating your projected graduation date.
 - e. TWO letters of recommendation from individuals in the community. (No letters from family members or Richmond/Madison County NAACP Branch members
 - f. NAACP application or membership, if not a current member, including the registration fee.

SCHOLARSHIP AWARD:

- Scholarship awards will be determined annually by the Richmond/Madison County NAACP Scholarship Committee. Appointment/establishment of the committee will be by the Branch and will consist of three members.
- 2. MAXIMUM scholarship award is \$1000.00
- 3. At no time should the aggregate scholarship award for one year exceed 50% of the balance of the scholarship fund.
- 4. All scholarship awards will be announced NO LATER THAN MAY 7th and presented at the high school Awards Day even or on the first Thursday of August annually, with ceremonial presentations to be given during the Freedom Fund Banquet or other NAACP branch sponsored event.
- 5. The recipient must provide a letter form the school confirming his/her acceptance for the upcoming semester/quarter prior to delivery of the scholarship to the Student.

PLEASE MAIL ALL DOCUMENTS IN A SEALED ENVELOPE, NO LATER THAN: APRIL 15th, ADDRESSED TO:

Richmond/Madison County NAACP Branch ATTN: Scholarship Committee PO Box 105 Richmond, KY 40476-0105

NOTE: INCOMPLETE FILES WILL NOT BE CONSIDERED FOR A SCHOLARSHIP AWARD.

Richmond/Madison County NAACP Scholarship Application Richmond/Madison County NAACP Branch PO Box 105 Richmond, KY 40476-0105

PLEASE PRINT OR TYPE

Name:			
Address:		State:	ZIP:
E-Mail Address:			
Phone Number:			
High School:	Date of Graduation:		
ACT Score:	SAT Score:	GPA:	
College you plan to attend:			
Have you been accepted by the	above College/School?		
Major: (if declared)	Minor:		
Number of College Hours comple	eted:		
PERSONAL INFORMATION: Ple	ase describe/list any awards c	or recognition that you n	ave received.
PLEASE list any scholarships you NAME:		nt AWARDED:	
NAME:			
NAME:		nt AWARDED:	
PLEASE list any financial aid, incl	uding grants, you have been a	awarded:	
NAME:	TOTAL amour	nt AWARDED:	
NAME:		nt AWARDED:	
NAME:		nt AWARDED:	
NAME:			
NAME:			
NAME:		nt AWARDED:	

Please list all activities (NAACP, School, Community, Ch	nurch, etc. in which you have been involved)
I have read and understand the guidelines for applying Scholarship. I am enclosing ALL REQUIRED documents	
Applicant Signature:	Date:
Parent/Guardian Signature:	Date:
PLEASE MAIL ALL DOCUMENTS IN A SEALED ENVELOPE ADDRESSED TO:	E NO LATER THAN May 1st EACH YEAR,
Richmond/Madison County NAACP Branch ATTN: SCHOLARSHIP COMMITTEE	

NOTE: INCOMPLETE FILES WILL NOT BE CONSIDERED FOR A SCHOLARSHIP AWARD:

PO BOX 105

Richmond, KY 40476-0105