

2023 NAACP Freedom Fund

Scholarship Application

**Lake County Branch NAACP
P.O. Box 744
Painesville, OH 44077**



Application must be received by April 28, 2023
For more information contact the branch
(440) 639-1008

APPLICATION INSTRUCTIONS

General Instructions:

Please read the following information **before**, completing this application.

Completed applications MUST be received by April 28,2023 to be considered for the current award year.

Eligibility Criteria:

- Applicant must be residing in Lake County, Ohio and attending a Lake County High School.
- Applicant must currently be a High School Senior in good academic standing and possess a cumulative high school grade point average of at least 2.5 (C+) on a 4.0 system.
- Applicant must be either a minority student (African American, Asian American, American Indian, Latino/Hispanic, Pacific Islander) or a member of the NAACP Youth Council.

AWARD: \$1,000

If you are selected to receive a scholarship, your award will be sent to your College/University's financial aid office and credited to your account after the Freedom Fund Banquet in October.

Required Material:

Please complete the application in its entirety and attach **all** supporting documents.

- College/University letter of acceptance (and a copy your fall schedule if available)
 - Two letters of recommendation
 - A copy of your current transcript (high school) and a final official transcript of your grades.
 - **Recent photograph** (To be publicized in the newspaper)
 - A typed double-spaced essay of 500 words or more explaining what career you wish to pursue after college. Also include a description of your personal goals and what you hope to accomplish in your lifetime.

SCHOLARSHIP APPLICANT'S INFORMATION

**INCOMPLETE and /or LATE APPLICATIONS
WILL NOT BE CONSIDERED**

Applicant's Name: _____

Date of Birth: _____

Home Address: _____

City & State: _____ Zip Code: _____

Home Phone: (____) _____ Cell phone: (____) _____

Student's Email Address: _____

Parent/Guardian Name: _____

Home Phone: (____) _____ Cell phone: (____) _____

Parent/Guardian Email Address: _____

Applicant resides with: ___Mother ___Father ___Both ___Guardian

Educational Status:

High School Name: _____

College/University you will be attending: _____

Intended Major: _____

Name of Financial Aid Officer: _____

Financial Aid Officer's Address: _____

Financial Aid Phone Number: _____

Start Date of Fall Classes 2023: _____

Involvement in School & Community During High School:

(Please include extracurricular activities, volunteer work, and employment)

CLUB or ORGANIZATION	YOUR ROLE	YEARS INVOLVED
----------------------	-----------	----------------

Example: National Honor Society	member	4
---------------------------------	--------	---

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____

Applicant's Signature _____

Parent's/ Guardian's Signature _____

**APPLICATIONS SHOULD BE MAILED TO: LAKE COUNTY BRANCH NAACP
P.O. BOX 744, PAINESVILLE, OH 44077 TO BE RECEIVED BY APRIL 28, 2023.**

Scholarship Recipient's Informational Checklist

This form **MUST** be completed and returned by **April 28, 2023**.

Applicant's Name: _____

Home Phone: (____) _____ **Cell phone:** (____) _____

Student's Email Address: _____

Home Address: _____

City: _____ **Zip:** _____

Please check all that apply:

Yes ___ If I receive a scholarship, I will attend the NAACP Freedom Fund Banquet (Thursday, October 26, 2023) to receive my scholarship award. If I am unable to attend I will send a representative.

Yes ___ I have enclosed a recent photo (to be used for news publications).

Yes ___ I have enclosed my 500 word or more essay.

Yes ___ I have enclosed a copy of my current transcript.

Yes ___ I have two letters of recommendation.

Yes ___ I have my College/ University acceptance letter.

Yes ___ I will volunteer 8 hours at the "Painesville Party in the Park", Juneteenth event or other NAACP event.

Name of College/ University you will be attending:

Name of Financial Aid/ Bursars' Officer: _____

Financial Aid/ Bursars' Officer Address: _____

Phone Number: _____

Start date of fall classes 2023: _____