

**NATIONAL ASSOCIATION FOR THE
ADVANCEMENT OF COLORED PEOPLE**

**APPLICATION FOR
COLLEGE ASSISTANCE AWARD**

SPONSORED BY THE N.A.A.C.P. – GLENS FALLS BRANCH

ELIGIBILITY CRITERIA

The NAACP award program has been developed to reflect the philosophy and goals of both the national organization and its local branch. Certain criteria, therefore, will govern the eligibility of applicants. Consideration shall be limited to those applicants who meet and fulfill the following requirements:

1. Applicants must be continuing their education in a duly accredited college, university, or other institute of higher learning, or a technical or trade school approved by the local branch.
2. Applicants must hold membership in the NAACP, verifiable by a membership card or valid receipt for payment of membership dues.
3. Applicants must be high school seniors or graduates with a minimum cumulative average of B, or 3.0 out of a 4.0 system.
4. Applicants must be accepted as full-time students in their prospective school.
5. Applicants must reside within the geographic region of the Glens Falls Branch of the NAACP.
6. Provided they meet all other criteria, NAACP board members and their families, other than those directly involved in the selection process, are eligible for consideration.
7. Although applicants may apply more than once for an award, they can receive only one award.
8. Applicants who demonstrate a significant level of service to their community will be given particular consideration for an award.

DOCUMENTATION

THE APPLICATION PROCESS REQUIRES SUBMISSION OF THE FOLLOWING DOCUMENTS:

- Completed application form. Incomplete applications may not be considered.
- Complete and official transcripts for each grade year in each high school that applicant has attended.
- Proof of acceptance for full-time enrollment at an accredited college, university, or institute of higher learning, or a technical or trade school.
- A written essay describing the following:
 - A. The applicant's life goals
 - B. How applicant's higher education plans will help achieve these goals.
- A completed FAFSA financial aid form.
- Two letters of reference from teachers or school guidance counselors. Each reference is to be sent from the person completing it directly to the address below:

Award Committee
NAACP - Glens Falls Branch
P.O. Box 478
Glens Falls, N.Y. 12801

**ALL APPLICATIONS AND REQUIRED DOCUMENTATION MUST BE
POSTMARKED NO LATER THAN MAY 15TH**

APPLICANT DATA

One of the goals of the award program is to increase educational opportunities for those we serve. Accurate applicant data is important in assessing the effectiveness of our efforts to solicit applications from a diverse population. Please indicate below the category or categories which best represent your ethnic background and other identifying characteristics. More than one category may be checked.

- African American (having origins in any of the Black peoples of Africa)

- Hispanic or Latino (Puerto Rican, Mexican, or Central/South American, regardless of race)

- Native American (having origins in any of the indigenous peoples of North America, and maintaining cultural identification through tribal affiliation or community recognition)

- Asian or Pacific Islander (having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific islands)

Date of Birth: _____

APPLICANT INFORMATION

Name _____

Social Security Number _____

Permanent Address _____

City _____ State _____ Zip Code _____

Home Telephone Number () _____ - _____

Are you a member of the N.A.A.C.P. (Yes) _____ (No) _____

If yes, of which Branch, Youth Council, or College Chapter are you a member?

Please list any other community or service organizations of which you are a member:

How did you hear about this award?

Have you applied for any other N.A.A.C.P. awards? (Yes) _____ (No) _____

If yes, which ones? _____

Please provide the following information about your high school education:

NAME & LOCATION OF SCHOOL	DATES ATTENDED (FROM/TO)	CUMULATIVE GPA	DEGREE OR DIPLOMA

List any academic awards or honors that you have received:

List any extracurricular activities in which you are involved:

Indicate the month and year of your anticipated graduation from high school:

Please provide the names of colleges, universities, or other institutes of higher learning, or technical or trade schools to which you have applied:

NAME OF INSTITUTION	LOCATION	CONFIRMATION OF ACCEPTANCE (YES/NO)

Place an asterisk (*) beside the one that you would most like to attend.

Anticipated degree type and completion date: _____

