



Personal Information

Name: _____
Address: _____
Cell phone: _____ Home phone: _____
Email: _____
Date of Birth: _____ Are you of African descent? _____

Parent(s)/Guardian(s) Information

Father: _____
Mother: _____
Guardian(s): _____ Relationship: _____
Address: _____
Contact Number: _____
Occupation: _____

Qualifications

You are eligible for an AACH scholarship based on the following qualifications:

- ❖ You are of African American descent.
- ❖ Attend high school and reside in Hernando County
- ❖ Have achieved a GPA of 3.0 or better.
- ❖ Demonstrate evidence of school (extracurricular) involvement, community service and if applicable, employment information
- ❖ Provide documentation of acceptance to a post-secondary institution.
- ❖ Submit the 6 items under the Application Information section above.

High School Information

Your Name: _____

High School: _____

School Address & County: _____

GPA: _____ SAT/ACT Scores: _____ / _____ Florida Standards Score: _____

Attendance Record: _____% Graduation Date: _____

Extracurricular Activities:

Community Service:

Anticipated Annual Tuition: _____

How do you intend to pay? Please include supporting information such as family, loans, and awards.

Scholarships Awarded:

- | | |
|------------------------------------------------|--------------|
| a) Florida Pre-Paid | Amount _____ |
| b) Florida Academic Scholars Award (FAS) | Amount _____ |
| c) Florida Medallion Scholars Award (FMS) | Amount _____ |
| d) Florida Gola Seal Vocational Scholars (GSV) | Amount _____ |
| e) Other(s): _____ | Amount _____ |

Application Check List

- | | |
|----------------------------------------------------------------------------|--------------------------|
| 1. Personal Information page | <input type="checkbox"/> |
| 2. High School Information page | <input type="checkbox"/> |
| 3. A sealed, official High school transcript | <input type="checkbox"/> |
| * Only the Cumulative Summary page | |
| 4. Letter of College / University Acceptance | <input type="checkbox"/> |
| 5. 2 letters of reference _ teacher or counselor | <input type="checkbox"/> |
| 6. Personal Biography – 300 word essay | <input type="checkbox"/> |
| <i>What is your plan for the future and what influenced your decision?</i> | |
| <i>(No AI compositions will be accepted)</i> | |
| ❖ An in-person interview may/may not be required. | |

Photo Release

Selected awardees agree to allow the AACH to share their image with local media, digital media, television, radio and/or the AACH websites.

Signed (parent/guardian if under age 18): _____

Signed (student 18 y.o. or older): _____

Application due date: Monday, May 20th, 2026

**Mail to: African American Club of Hernando, Inc.
Attn: Scholarship Committee
P.O. Box 5203
Spring Hill, Fl 34611**

Student Signature

Date

Parent/Guardian Signature

Date

* Contact: Text Leslie Colyer-Brown @ 973-271-7637. Please Leave your name and question.