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# Sisters For A Better Black Community, Inc.

# SCHOLARSHIP APPLICATION

Sisters for a Better Black Community was founded during the fall of 1971 in order to promote a better relationship among members of the Rochester community and surrounding areas. One of our many projects is the annual awarding of scholarships to minority students. Scholarships are available to both males and females who meet the following requirements:

# Scholarship Qualifications and Requirements

1. Applicants must possess a cumulative average of 2.5 (C+) or above.
2. Applicants must demonstrate a need for financial assistance in order to attend college.
3. Applicants must possess definite proof of acceptance in an accredited institution of higher learning (2 or 4 year), Business College, or technical school.
4. Applicants must have an official transcript from their high school, including available senior grades.
5. Applicants must give rank in class.
6. Applicants must provide three recommendations (forms enclosed with application) meeting the following criteria:
* One must be from a counselor or senior teacher who can evaluate overall academic performance.
* Two must be from a community leader, former teacher, minister, employer or mentor.
1. To retain the scholarship, the recipient must be actively enrolled in college by

September 30 and submit necessary paperwork.

1. All scholarship materials must be received at the address listed below by:

## April 15th

Final selection will be based upon academic achievement, financial need, character and leadership ability.

NOTICE:

AN INCOMPLETE APPLICATION WILL NOT BE CONSIDERED. PLEASE CHECK YOUR APPLICATION AND MAKE SURE YOU HAVE ANSWERED ALL QUESTIONS!

PLEASE TYPE or PRINT LEGIBLY ALL INFORMATION

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street City Zip

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone #\_\_\_\_\_\_\_\_\_\_ (home)\_\_\_\_\_\_\_\_\_\_\_\_\_\_(cell)

High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Graduation Date: \_\_\_\_\_\_\_\_\_\_\_\_ GPA: \_\_\_\_\_\_\_\_

School Activities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Community/Church Activities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Honors and Awards: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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If you are employed, please give company name and address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of immediate supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of persons in family (including yourself): \_\_\_\_\_\_\_\_\_

Number in family attending college: \_\_\_\_\_\_\_\_\_

**Total gross family income (check one):**

**\_\_\_\_\_ under $10,000 \_\_\_\_\_ $30,000 to $39,999**

**\_\_\_\_\_ $10,000 to $19,999 \_\_\_\_\_ $40,000 to $49,999**

**\_\_\_\_\_ $20,000 to $29,000 \_\_\_\_\_ over $50,000; please specify amount: \_\_\_\_\_\_\_\_\_\_**

List all sources of financial aid (including scholarships or grants) received thus far.

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List the schools(s) to which you have applied. Indicate acceptance with an asterisk (\*). Also include the location of the school(s), and give projected tuition costs per year.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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THREE LETTERS OF RECOMMENDATION ARE NECESSARY IN ORDER TO EVALUATE YOUR APPLICATION -- ONE FROM A COUNSELOR SENIOR TEACHER WHO CAN EVALUATE YOUR OVERALL ACADEMIC PERFORMANCE AND TWO FROM A COMMUNITY LEADER, FORMER TEACHER, MINISTER, EMPLOYER OR MENTOR.

Please list the three individuals to whom you plan to submit your recommendation forms.

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Business or home)

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Business or home)

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Business or home)

# BIOGRAPHICAL SKETCH

Please write an essay on your background and history. Include the following information: education, career goals and objectives, and any other pertinent data necessary to assess you as a viable candidate for this scholarship. Use additional sheets if necessary. **ESSAY MUST BE TYPED – DO NOT SUBMIT A HANDWRITTEN ESSAY.**

**Please return all completed applications to:**

**sbbcinc@gmail.com** **or mail to:**

**SBBC Inc.**

**P.O. Box 30198**

**Rochester, NY 14603**

**SBBC DISCLAIMER**

**SBBC is a non for profit organization, as recipient of a SBBC scholarship you agree to certain terms concerning the use of your name/photo in our Scholarship Souvenir Journal that is published for our annual Scholarship Luncheon and Fashion Show event, our major fundraiser.**

**SISTERS FOR BETTER BLACK COMMUNITY**

Scholarship Recommendation

Sisters for Better Black Community is a service organization which provides scholarships primarily to minority high school students. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**hasapplied for a scholarship from our organization

 **(Name of Student)**

 and has listed you as a reference. Please take a few moments to respond. This should be returned by April 15 in order for student to be considered. Thank you.

……………………………………………………………………………………………………

Please comment briefly on the following points relating to the applicant’s quantifications:

**CHARACTER:** (overall assessment of personality, poise, and distinguishing traits)

**SCHOLASTIC PERFORMANCE:** ( assessment of individual’s academic performance, such as grades, test scores, rank in class, etc. if you have access to such information)

**LEADERSHIP:** (assessment of the individual’s capability to take on responsibility and command situations when needed)

**INITIATIVE:** (assessment of individual’s ability to be a self-starter, develop ideas, begin projects)

Please feel free to use a separate page and attach to this form any comments regarding the qualities of the individual that may not already be covered.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNATURE**  **TITLE**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ADDRESS DATE**

AFTER YOU HAVE COMPLETED ALL OF THE REQUESTED INFORMATION, PLEASE RETURN via email to sbbcinc@gmail.com.

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNATURE**  **TITLE**

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