# Continuing Student Application

# PRINCE HALL SCHOLARSHIP FOUNDATION OHIO CONTINUING SCHOLARSHIP AWARD APPLICATION

### TO BE COMPLETED BY THE STUDENT ACADEMIC YEAR 2025

| DATE:   |               |   |              |
|---|---------------|---|--------------|
| NAME:   |               |   |              |
|   | LAST          | FIRST   | MIDDLE       |
| ADDRESS:  |               |   |              |
|   | STREET        | CITY  | STATE ZIP    |
| EMAIL:  |               |   |              |
| TELEPHONE:  |               | DATE OF BIRTH:                                  |              |
| FATHER'S NAME:  |               | OCCUPATION                                      | SALARY       |
| MOTHER'S NAME:  |               | OCCUPATION                                      | SALARY       |
| GUARDIAN'S NAME:                                      |               | OCCUPATION                                      | SALARY       |
| YOU HAVE PERMISSI<br>WITH AS A PERSONA                |               |   |              |
|   | PHONE #       |   |              |
| NUMBER OF SIBLING<br>CURRENT OR FORME<br>ORGANIZATION |               |   | R IN COLLEGE |
| CUM. GPA  | CURRENT C     | CLASS YEAR SOP                                  | H JR SR      |
| COLLEGE OR TECHN                                      | ICAL SCHOOL C | URRENTLY ATTENDING                              |              |
| LOCATION  |               |   |              |
| DEGREE MAJOR  |               |   |              |
|   |               | ATION IS TRUE, CORRECT<br>ORMATION WITH YOUR AS |              |
| APPLICANT'S SIGNA                                     | ATURE:        |   |              |
|   | AU            | THORIZED USE ONLY                               |              |
| ORGANIZATION  |               | ORGANIZATION                                    |              |
| NAME & NUMBER   |               | CHAIRPERSON                                     |              |

**SUBMISSION DEADLINE JUNE 1, 2025** 

#### **ACADEMIC YEAR 2025**

**Continuing Applicants Only! (This completed form must be typewritten)** 

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## PRINCE HALL SCHOLARSHIP FOUNDATION OHIO CONTINUING SCHOLARSHIP AWARD APPLICATION

#### REQUEST FOR CONFIDENTIAL INFORMATION

TO: ADVISOR OR COUNSELOR

| FROM:    |              |                   |
|----------|--------------|-------------------|
|          | STUDENT NAME | STUDENT SIGNATURE |
| ADDRESS: |              |                   |
|          | STREET       |                   |
|          | CITY         | STATE ZID CODE    |

I have applied for the Prince Hall Scholarship Foundation for financial assistance. The Foundation is a non-profit organization, registered in Ohio, which gives assistance to previously selected recipients of the Prince Hall Scholarship Foundation Awards.

<u>Please attach and send</u> your evaluation of my academic talents, personal characteristics, group relationships, extracurricular activities, and other pertinent information that you believe would be helpful to evaluate my application.

<u>I also request that a copy of my College/University school transcript be attached.</u>

Thank you for taking the time to complete and mail this information. My opportunity for receiving an award will be increased if this information and the attached transcript are returned by June 1, 2025.

RETURN TO: CHESTER C. CHRISTIE
7970 Priestley Drive
Reynoldsburg, OHIO 43068-9768