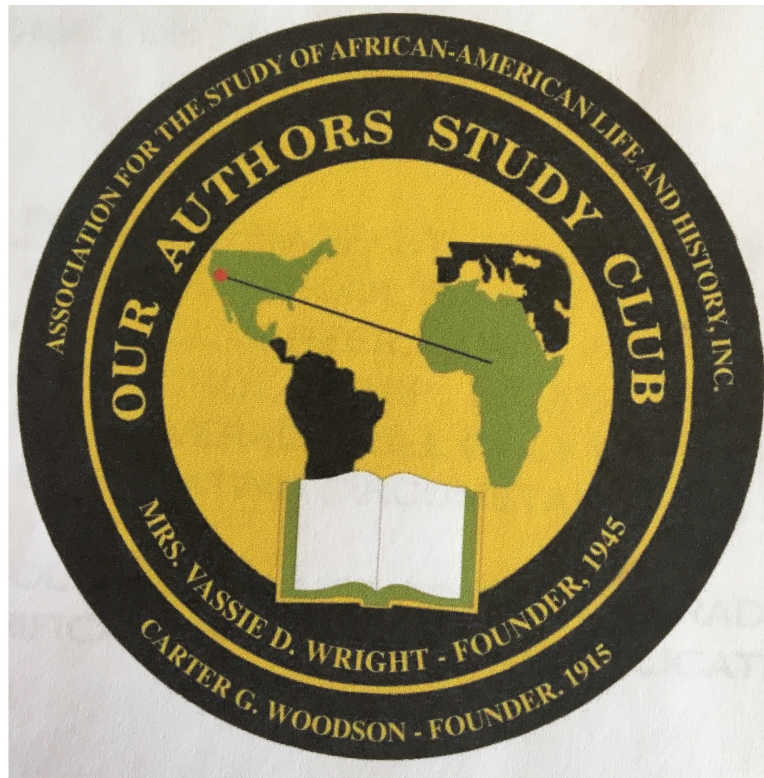


# **OUR AUTHORS STUDY CLUB, INC.**

*Los Angeles Branch of the Association for the Study  
of African American Life and History*



## **SCHOLARSHIP APPLICATION HIGH SCHOOL SENIOR**

**Application is due and  
must be postmarked by**

June 30, 2024

# ELIGIBILITY

Please print:

Applicant Name: \_\_\_\_\_

1. COMPLETE CHECKLIST.
2. ALL DOCUMENTS MUST BE TYPED.
3. DO NOT FOLD OR STAPLE DOCUMENTS.

- STATUS: APPLICANT MUST BE A HIGH SCHOOL SENIOR IN GOOD ACADEMIC STANDING.**
- MINIMUM GRADE POINT AVERAGE: APPLICANT MUST HAVE AT LEAST 3.0 GPA ON HIS/HER SCHOOL'S APPLICABLE SCALE DURING THE ACADEMIC YEAR.**

**FOR CONSIDERATION OF THE OASC, INC. SCHOLARSHIP, APPLICATION MUST BE COMPLETED IN ITS ENTIRETY. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

# REQUIREMENT CHECKLIST

Please print:

Applicant Name: \_\_\_\_\_

- 1. **APPLICATION:** Please complete all parts of **Application**. If an area does not apply, write "N/A" in the space provided.
- 2. **SCHOOL TRANSCRIPT & COURSE SCHEDULE:** You must provide an **ORIGINAL, OFFICIAL COPY** of your **SPRING 2024 SCHOOL TRANSCRIPT & COURSE SCHEDULE FOR THE FALL 2023 SEMESTER**.
- 3. **RESUME: INCLUDE EXTRACURRICULAR ACTIVITIES AND VOLUNTEER/WORK EXPERIENCE.**
- 4. **LETTER OF ACCEPTANCE FROM THE COMMUNITY COLLEGE OR 4-YEAR COLLEGE/UNIVERSITY OF YOUR CHOICE.**
- 5. **ESSAYS:** You must submit **ONE ESSAYS** addressing A following topics:

### **Essay #1: Life Challenges & Career Goals**

- a. What life challenge(s) have you overcome to get to college?
- b. Describe your career goals, how you plan to accomplish those goals, and what steps you are currently taking towards those goals.

### **Essay #2: Dr. Carter G. Woodson**

- a. Why is Dr. Carter G. Woodson an important historical figure?
- b. What is the importance of knowing about the accomplishments of Dr. Woodson, especially for African Americans?
- c. How is his story an inspiration for you?

- 6. **ESSAY REQUIREMENTS:**
  - a. Essays must be 1-1½ pages, doubled spaced, 12-point font, have 1-inch margins, and in one of the following fonts: Arial, Cambria, Times, Times New Roman, or Verdana.
  - b. Each essay page must be numbered and have applicant's name.
  - c. Each essay must have at least 3 paragraphs.
  - d. Each essay must address at least three supporting points.
  - e. Each essay must have a conclusion.
  - f. **Single-spaced and one-paragraph essays WILL NOT BE ACCEPTED.**

**All items above must be typed and on separate pages.**

## STUDENT INFORMATION

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip code

Cell #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

### Family Information

Mother's Name: _____	Father's Name: _____
Is she living? _____	Is he living? _____
College (if any): _____	College (if any): _____
Highest Degree: _____ Year: _____	Highest Degree: _____ Year: _____
If not living with parents, with whom do you make your permanent home? _____	
Total number of children living at home including yourself? _____	
Total number of others attending college? _____	
Mother's Address: _____	
Home Phone#: _____ Cell#: _____	
Email: _____	
Father's Address: _____	
Home Phone#: _____ Cell#: _____	
Email: _____	

	High School(s) Attended	Years Attended	GPA
1.			
2.			
3.			

**Only give GPA for high school from which you are graduating.**

# STUDENT FINANCIAL INFORMATION

Please print:

**Applicant Name:** \_\_\_\_\_

<b>Schools Applied to for Fall 2024</b>					
	Name of College	Program Length	Location	Tuition/Fees per Year	Accepted? Yes/No
1.					
2.					
3.					
4.					
5.					
6.					
Degree and/or career choice:					

<b>College/University Expenses</b>			
		For most expensive college	For least expensive college
		School Name	School Name
Tuition		\$	\$
Housing costs		\$	\$
<b>Total Financial Need</b>		<b>\$</b>	<b>\$</b>
<b>Financial Assets</b>			
Expected family contribution per year			\$
Student currently employed?	Yes/No	Weekly earnings?	\$
Student assured summer employment?	Yes/No	Anticipated summer earnings?	\$
		<b>Financial Assets Total</b>	<b>\$</b>
<b>TOTAL NEED:</b>			<b>\$</b> _____
<b>Subtract Financial Need Total from Financial Assets Total</b>			

**If you need more space, please write on the back of this page.**

# OASC, INC. MEMBER RECOMMENDATION

Please print:

**Applicant Name:** \_\_\_\_\_

OASC Member Name: \_\_\_\_\_

1. How long have you known this applicant and in what capacity?

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2. What qualities of the applicant reflect character that will represent well the ideals of Our Authors Study Club, Inc.?

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Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# LETTER OF RECOMMENDATION

## Counselor, Teacher, or Administrator

**Please print:**

**Applicant Name:** \_\_\_\_\_

Please respond to the following questions on school letterhead:

1. In what capacity and how long have you known applicant?
2. What qualities does the applicant have that enable her/his success at your college/university?
3. How has the applicant shown leadership and positive collaboration with fellow students in course and/or extra-curricular activities? If you have not been able to observe applicant in this capacity, please say so.
4. What about the applicant has impressed you?

Please rank the applicant in the following areas? If you are unable to evaluate an area, write "N/A" in the space provided.

	<b>EXCELLENT</b>	<b>VERY GOOD</b>	<b>AVERAGE</b>	<b>BELOW AVERAGE</b>
LEADERSHIP				
INITIATIVE				
GOAL ORIENTED				
ENTHUSIASM				
ADAPTABILITY				
MATURITY				
WRITTEN COMMUNICATION				
ORAL COMMUNICATION				
COMMUNITY SERVICE				

Please print:

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Institution: \_\_\_\_\_

Work Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# CHARACTER REFERENCE OTHER THAN FROM SCHOOL OR RELATIVE

Please print:

**Applicant Name:** \_\_\_\_\_

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Home Phone#: \_\_\_\_\_ Cell #: \_\_\_\_\_

1. How long have you known applicant and in what capacity?

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2. What qualities does the applicant have that enable her/his success in college?

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## **CERTIFICATION**

**Must be signed by applicant.**

I certify that all information is true and correct to my knowledge. I further certify the application is complete and contains all items from the *Requirement Checklist*.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**Application is due and must be postmarked by  
June 30, 2024**

**Mail all required materials to  
Keta Davis  
5767 W. Olympic Blvd.  
Los Angeles, CA 90036**

**Please email a copy of your application  
and questions regarding application to:  
[vassie@oascla.org](mailto:vassie@oascla.org)**