

NCBEMO Scholarship Application

1. **Name of Student** _____
Last First Initial

2. **Street Address** _____
Zip Code City or County

3. **Place of Birth** _____ 4. **Date of Birth** _____
Month/Day/Year

5. **Social Security No:** _____ 6. **Home Phone** _____

7. **Parents' or Guardian's Names and Address** _____

_____ **Phone Number** _____

8. **Verify Annual Household Income** ___ \$0-\$10,000 ___ \$11,000-\$20,000 ___ \$21,000-30,000
___ \$31,000-\$40,000 ___ \$41,000-\$50,000 ___ \$50,000 and higher

8a. Total # in Family _____ # of Dependents _____

9. **Name and Address of High School or College** _____

_____ **Phone Number** _____

10. **Name of College Applicant Plans to Attend/currently Attending** _____

11. **Location of College** _____

12. **Area of Study** _____

13. **Are you related by blood or marriage to any person now a member of NCBEMO?**
() Yes () No If Yes, Name and Relationship _____

14. **Are you a Senior in a North Carolina High School?** () Yes () No

15. **Are you a citizen of the U. S.?** () Yes () No

16. List at least two individuals (guidance counselors, college instructors, employers, community leaders, etc.) who have provided letters of recommendation (which are to be included with this application).

<u>Name/Title</u>	<u>Address</u>	<u>Phone Number</u>
_____	_____	_____
_____	_____	_____

17. Enclose an official certified copy of High School transcript or verification from college/university.

18. Write a brief biographical sketch, including a list of personal goals and a statement summarizing why you need the NCBEMO Scholarship to facilitate a college education (100 words or less).

19. List awards (local, state or national), scholastic involvement, community involvement, and any offices that you have held and summarize your achievement(s) within the organization.

20. List work and/or volunteer experiences.

AGREEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that false or misleading information given in my application or interview(s) may result in disqualification. I authorize investigation of all statements contained within this application for the NCBEMO Scholarship as may be necessary.

I understand that if I am selected, it is a requirement that I attend the Annual Meeting of NCBEMO where I will receive my Certificate of Award. I further understand that upon confirmation of enrollment and attendance at a four-year North Carolina college, the scholarship funds will be released to me.

I understand that only applicants selected for interviews will be notified.

Signature of Applicant

Date

Signature of Parents/Guardian

Date

**Please Submit Application
Councilwoman Cora Cole-McFadden
101 City Hall Plaza
Durham, North Carolina 27701-3328
DEADLINE: MAY 31, 2012**