2021 SCHOLARSHIP APPLICATION CRITERIA

Background
The National Council of Negro Women, Inc. was founded by educator and civil rights activist Dr. Mary McLeod Bethune on December 5, 1935. The Greater Pocono Section is pleased to offer our scholarship in honor of Dr. Bethune.

Scholarship Details

- The Scholarship will be in the amount of $600 for one chosen student.
- The Scholarship will be awarded once only.
- **Application deadline is Wednesday, March 31, 2021.**
- The awardee may be requested to attend a virtual meeting on Saturday, June 12, 2021 to accept the scholarship award.

Qualifications

- The scholarship awardee must meet the following criteria:
  - Be a female student of African descent
  - Be a senior at a public high school in Monroe County, Pennsylvania
  - Have a minimum 2.7 GPA
  - Be accepted to a four-year university in the Fall of 2021
  - Cannot be related to any current Greater Pocono Section members

Process

- Applicant will complete all components and mail application and required documentation to:
  Greater Pocono Section
  National Council of Negro Women, Inc.
  200 S. Courtland Street
  P.O. Box 161
  East Stroudsburg, PA 18301-9998

  Or email all documents to:
  GreaterPoconoSection@gmail.com
  Subject: College Planning 101 Scholarship Application
  Attention: College Planning 101

- Application will be judged by a panel of Greater Pocono Section College Planning 101 members.
- The winner will be notified by the Greater Pocono Section by Friday, April 30, 2021.
- The winner will be invited to attend a Greater Pocono Section meeting to be recognized.
2021 SCHOLARSHIP APPLICATION

DEADLINE: MARCH 31, 2021

Please type or print information. If additional information is requested or more space is needed, information may be continued on additional sheets of paper and attached to the application.

I. Applicant Information

Last Name__________________________ First Name__________________________ Middle Initial __

Address______________________________________________________________

City_____________________________ State _______ Zip Code________

Phone___________________________ County________________________ Date of Birth________

Email Address ________________________________ Phone Number________

Parents or Guardian(s) Name______________________________________________

Parent’s Email Address __________________________ Phone Number________

School District________________________________________________________ Grade____

II. Post Secondary School Data

(Name of school for which financial aid is requested. If unknown, please list in order of preference where applications have been sent.)

School______________________________ City________________________ State_

School______________________________ City________________________ State_

Type of School:  o 4 Year University o Other__________________________

Attendance: o Full Time o Part Time or more o Other________

I will live:  o On Campus o Off Campus o Home with Parents o With Spouse

Major Course of Study________________________ Minor Course of Study ____________
III. Work or Extra-Curricular Experience

Describe your work and/or extra-curricular experience during the last 4 years. Attach a second sheet if necessary.

__________________________________________

__________________________________________

__________________________________________

IV. Awards and Honors

List all school and community awards or honors you have received during the last 4 years. Attach a second sheet if necessary.

__________________________________________

__________________________________________

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V. Unusual Circumstances

Please describe any family, personal or financial circumstances that you believe warrant special consideration. Examples would be financial hardship, disabilities, financial separation or unusual family responsibilities. Attach a second sheet if necessary.

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__________________________________________
VI. Transcript Information
Please include your most recent available transcript. Please also include ACT and/or SAT scores, if available. (Due to the time allotted, screenshots are permissible).

VII. References
Applicant must provide the names of two references (a teacher and/or employer, pastor, coach etc.) who will attest to the qualification for this scholarship.

Name_________________________ Address________________________ Phone_______

Name_________________________ Address________________________ Phone_______

VIII. Essay
Please submit an essay, on a separate sheet, between 250 and 1000 words on how the Coronavirus (COVID-19) has impacted your life.

IX. Certification
By submitting this application, I certify that the information is complete and accurate to the best of my knowledge. I understand that falsification of information may result in disqualification from the application process and termination of any scholarship granted.

Applicants Signature______________________________ Date_____________________

Send completed application and required attachments to:
Greater Pocono Section
National Council of Negro Women, Inc.
200 S. Courtland Street
P.O. Box 161
East Stroudsburg, PA 18301
Attention: College Planning 101 Scholarship

Or email all documents to:
GreaterPoconoSection@gmail.com
Subject: College Planning 101 Scholarship Application