MONROE COUNTY BRANCH NAACP
2021 SCHOLARSHIP APPLICATION CRITERIA

Background
Founded February 12, 1909, the NAACP is the nation’s foremost, largest, and most widely recognized civil rights organization. Its more than half-million members and supporters throughout the United States and the world are the premier advocates for civil rights in their communities, leading grassroots campaigns for equal opportunity and conducting voter mobilization.

Scholarship Details

• The Scholarship will be in the amount of $500 for one chosen student.
• The Scholarship will be awarded once only.
• Application deadline is Wednesday, March 31, 2021.
• The awardees may be requested pick up their awards in person in June 2021 at a location and date to be determined.

Qualifications

• The scholarship awardee must meet the following criteria:
  o Be a senior at a public high school in Monroe County, Pennsylvania
  o Have a minimum 2.5 GPA
  o Be accepted to a two or four-year university in the Fall of 2021
  o Must not be related to any current MC NAACP Executive Committee Members

Process

• Applicant will complete all components and mail application and required documentation to:
  Monroe County NAACP Branch
  P.O. Box 487
  Stroudsburg, PA 18360
  Attention: MC NAACP Education Committee

  Or email all documents to:
  monroenaacpeducation@gmail.com
  Subject: MC NAACP 2021 Scholarship Application
  Attention: MC NAACP Education Committee

• Application will be judged by a panel of Monroe County NAACP Education Committee members.
• The winner will be notified by the MC NAACP Education Committee by Friday, April 30, 2021.
• The winner will be invited to attend a MC NAACP event to be recognized.
MONROE COUNTY BRACH NAACP
2020 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______ Current GPA _________

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.

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

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:
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