

National Association for the Advancement Of Colored People Killeen Branch, Unit 6189 P.O. Box 1522 Killeen, TX 76540-1522 www.killeennaacp.com

Scholarship Application 2022-2023

Dear Applicant,

Thank you for your interest in the Killeen Branch NAACP Scholarship. We are offering this opportunity of financial support to Senior High School students, graduating in June 2023, from a high school in the Killeen and Copperas Cove Independent School Districts. If you qualify to be a potential recipient of our scholarship with goals to attend college in the fall semester of 2023, please complete the attached application in its entirety and include your signature on the specified line. Along with your application, **you must select one of our topics to discuss in a typed essay AND submit an official transcript.**

<u>The deadline for your application packet is March 10, 2023</u>. Please mail your packet before or on this date. We will accept packets that are postmarked before or on March 10, 2023. All packets will be reviewed by the scholarship panel. The Killeen Branch NAACP will contact the scholarship recipients by March 24, 2023. Recipients will be recognized at the Annual Freedom Fund Banquet scheduled to take place April 14, 2023.

If you have any questions, please call Mrs. Moultrie at 254-338-1562.

Directions for the essay:	All essays must be typed for consideration Minimum 500 words Double-spaced Header on each page with legal name included
	neader on each page with legal name included
Essay Cover Page:	Title
	Full Legal Name
	Permanent Address
	Name of High School
	you could make a change in the world, what would it be and why? OR
(2) Wł	no has influenced you the most throughout your life and why?

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ease i	type or print in black ink.	
1.	Applicant's Full Legal Na	me:
2.	Applicant's Contact Information:	
	Home Address	
	Permanent Home _ Telephone Number E-mail Address _	
3.	Applicant's School Inform	ation:
	Name and Address of your High School	
	Guidance Counselor Current G.P.A. Current Class Rank	
	List all of your Honors Courses, To include Dual Courses	
	- Name of College/University you have been accepted to or plan to attend	/
	Major(s) you hope to study	

4. Applicant's Personal Information:

Date of Birth	
Gender	
Race/Ethnicity	
List the ages of your	

List the ages of your Sibling(s)

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Parents	Both Parents at home
(mark one)	Divorced parents
	Single Mother
	Single Father
	Legal Guardian (specify:)

5. Applicant's Recognitions/Leadership Information:

List memberships, positions, honors, awards, certifications, or attach resume. Specify the time frame with a date (MM/YYYY—01/2023).



6. Applicant's Signature:

Your signature is required below. Without it, your application is not complete and cannot be processed.

I hereby certify that the information provided in this application is, to the best of my knowledge, true and correct. I have not knowingly withheld any facts or circumstances that would jeopardize consideration of this application.

Applicant's signature

Date