



*NATIONAL COALITION OF 100 BLACK WOMEN, INC.
BIRMINGHAM METROPOLITAN CHAPTER*

Scholarship Application

I. Application Requirements

- 1) African-American Female
- 2) Fill out the application form completely and sign.
- 3) In 500 words or less, clearly explain how this scholarship will assist you in achieving your career goals. State the amount of funds required to achieve your goals. Essays MUST be typed or printed neatly and submitted with completed application information.
- 4) Applicant must provide an official college/university transcript.
- 5) Applicant must provide a letter of recommendation from a faculty member, supervisor or other individual knowledgeable with applicant's qualifications. (Family members are ineligible.)
- 6) Applications must be postmarked by: **April 24, 2009**.

II. Applicant Information

Last Name: _____ First Name: _____ MI: _____

Address _____

City: _____ State: _____ Zip Code: _____

Email _____

Daytime Phone: _____ Cell Phone: _____

Date of Birth: _____ Age: _____ Gender – Female Yes No

Applicant Signature _____ Date: _____

III. School Information

College/University: _____

Career Field of Interest/Study: _____

Enrollment Date: _____

Expected Date of Graduation: _____

IV. Family Financial Information

Adjusted Gross Income of Parent(s)/Guardian(s) from IRS 1040, if applicable:

Under \$30,000

\$31,000 to \$50,000

Applicant's gross income: \$ _____

I hereby certify that the information I have submitted is correct. I authorize the release of this information to members of the National Coalition of 100 Black Women, Inc., Birmingham Metropolitan Chapter Scholarship Committee. I agree to the conditions established for this scholarship award by NCBW, Birmingham Metropolitan Chapter. I understand that this scholarship award is contingent upon my continued enrollment in an academic program at a historical black college/university in the Birmingham Metropolitan Area. Failure to meet these guidelines will forfeit the award.

Parent(s)/Guardian(s) Signature, if applicable: _____

Applicant's Signature: _____

Date Submitted: _____

Mail completed application, postmarked no later than (_____):

Vernell Tate, Chair of Scholarship Committee
NCBW, Birmingham Metropolitan Chapter
P O Box 2161
Birmingham, AL 35021

