

ADVOCATES FOR YOUTH EDUCATION, INC.

2024 SCHOLARSHIP APPLICATION PROCEDURE AND GUIDELINES

I. **Statement of Purpose:**

The purpose of the Advocates for Youth Education, Inc. Scholarship is to provide financial assistance to deserving African American youth in the Greater Cincinnati-area. It is hoped that the scholarship will promote achievement and encourage exceptional African American youth to seek professional and technical careers.

II. **Eligibility Requirements** - Applicants for each scholarship must be:

- a. An African American citizen of the United States living in the Greater Cincinnati-area.
- b. A graduating high school senior entering a four-year accredited college in the fall after their graduation for undergraduate study.
- c. A GPA of 2.5 or above on a 4.0 scale and a SAT score not less than 1200 or ACT score not less than 18.
- d. Recipients must show involvement in school/community leadership and volunteer service during their high school years.
- e. A student with financial need for tuition and other college expenses.
- f. A good citizen with good attendance in their school.

III. **Application Procedures** - Each applicant must complete all parts of the application and must also provide:

- a. A 250-words or less statement on the applicant's future goals.
- b. A 250-words or less statement by the applicant's parent or guardian.
- c. **An official transcript including this year's first semester grades, class rank, GPA (unweighted), and ACT/SAT test scores.**
- d. Two letters of recommendation from your counselor, teacher, advisor, administrator, minister, or employer.
- e. The complete package of application materials is due ***no later than February 29, 2024.***

CONFIDENTIALITY: All applications will be viewed only by the Scholarship Selection Committee members and will be destroyed after the annual scholarship selection process has been completed.

Advocates for Youth Education, Inc. Scholarship Application

This is a fillable form. Please type your responses in the fields below.

PERSONAL INFORMATION

(Please print)

Name: _____
(Last) (First) (Middle I.)

Address: _____ City: _____
(Number) (Street)

State: _____ Zip: _____ Telephone Number: _____

Email Address: _____ Gender: _____

Church or Religious Affiliation: _____ Date of Birth: _____

Applicant lives with (circle one): Mother & Father, Mother, Father, Grandparent(s),
Mother & Stepfather, Father & Stepmother, Other(s)

Number of sibling(s) in your home: _____

Age(s) of sibling(s): _____, _____, _____, _____, _____

Are you the first in your family to attend college? Yes No

How did you find out about this scholarship? _____

EDUCATION INFORMATION

Name of your high school: _____

Class Rank after 1st semester (09/19)? _____ out of / _____ G.P.A. _____
(unweighted)

Test Scores: _____ ACT _____ SAT

Have you passed all parts of the Ohio Graduation Test? Yes No

Are you a National Merit Finalist or Semifinalist? Yes No

List School/Community Activities:

<i>Activity</i>	<i>Year(s) of Participation</i>	<i>Office Held</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List Any Jobs:

<i>Job Description</i>	<i>Name of Employer</i>	<i>Length of Employment</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List Any Awards or Honors You Have Received:

<i>Kind of Award</i>	<i>Name of Agency/ Organization Granting Award</i>	<i>Year Received</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you qualify for any special needs awards or grants? Yes No

If yes, please list: _____

COLLEGE PLANS

Please list all of the colleges that you have applied to (list in order of choice).

1. _____
2. _____
3. _____

What is your intended major? _____

FINANCIAL AID

Have you applied for the following?

Financial Aid: Yes No

Other Scholarship(s): Yes No

If you answered yes to either of the above, have you received any aid or scholarships/grants? Yes No

If your answer is yes, please list them below.

Please sign the following:

I understand that falsification of any information provided in this application will disqualify me for consideration for this scholarship.

Applicant's Name

Date

**Send your application with all required documents and information
by February 29th, 2024 to:**

Email: ayescholarshipscincy@gmail.com

Or

Mail: Mrs. Kathy Dupree
4028 Paddock Rd.
Cincinnati, OH 45229

Phone: (513) 314-0588

Thank you for your interest in our scholarship program. Whether you are selected for an AYE scholarship or not, we wish you much success in your college career!