

BLACK EDUCATORS' ALLIANCE OF MASSACHUSETTS, INC. C/O SCHOLARSHIP COMMITTEE P. O. BOX 191014 BOSTON, MASSACHUSETTS 02119

SCHOLARSHIP APPLICATION

A COMPLETED SCHOLARSHIP APPLICATION INCLUDES THIS FORM, AN OFFICIAL TRANSCRIPT INCLUDING GPA AND SAT SCORES, AN ESSAY, THE COLLEGE/UNIVERSITY ACCEPTANCE LETTER, AND THREE LETTERS OF RECOMMENDATION.

- * ALL MATERIALS MUST BE POSTMARKED BY APRIL 1, 2019.
- * THIS APPLICATION MUST BE TYPED OR PRINTED LEGIBLY.

Personal Information

First Name	_ Last Name
Permanent Address	
City State	Zip
Home Phone Cell Phone:	Email
With whom do you reside? Mother Father	Both Guardian (identify)
Number of Siblings Ages	
Mother's Name	Occupation
Father's Name	Occupation:

Educational Information

High School		
School Address		
School Phone #		
Guidance Advisor	Tel. # (if different than above)	
*** GPA		
*** Class Rank		
**** Include official transcript and most recent grades		
	applied. Please indicate Acceptance with an asterisk *.	
Your intended major		
	ation and/or Community Involvement evel of participation; hours years invested)	
School and/or Community Activity	Role or Responsibility	
1		
4		

Continued
5
6
Did you work during High School?
If Yes, Where?
Did you receive any honors or special recognition while in High School?
List Any Special Honors or Awards Received

Essay Question (Please Type)

On a separate piece of paper tell us about your career goals and two significant experiences that have shaped your life and influenced your decision to pursue higher education.

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