

North Carolina Central University Alumni Association, Inc., Charlotte Chapter, P.O. Box 30353, Charlotte, NC 28230-0353

Dear School Official:

Please announce our scholarship opportunity to your senior class. The Charlotte Alumni Chapter of North Carolina Central University will award a scholarship to an incoming NCCU Freshman. As you work with interested students, please encourage them to follow all instructions. They will need to go to <u>www.nccucharlotte.org</u>, click the Scholarship link and print the application. On the following pages, we have also included a copy of the actual scholarship application for your reference. The application deadline is **Friday, May 15**, **2015**.

If you have any questions, please feel free to call me at 704-589-9013. We appreciate all that you do to further the education of all students.

Sincerely,

Ms. Fredicia Caldwell, Scholarship Chairperson North Carolina Central University Charlotte Alumni Chapter Email Address: **scholarship@nccucharlotte,org**

Mr. Brian McCorkle, President North Carolina Central University Charlotte Alumni Chapter Email Address: **bmccorkle@nccucharlotte,org**

> "Truth & Service" www.nccucharlotte.org



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Application Instructions:

Please complete the attached application to apply for the scholarships to be awarded by the Charlotte Chapter of the North Carolina Central University Alumni Association, Inc. for the Fall 2015 semester. Please note that this scholarship is a non-renewable scholarship that will be applied to the student's account at the beginning of the semester upon verification of enrollment.

Please return your completed application to:

Ms. Fredicia Caldwell, Scholarship Chairperson NCCU Charlotte Alumni Chapter P.O. Box 30353 Charlotte, North Carolina 28230-0353

The deadline is Friday, May 15, 2015. Late applications will not be accepted.

Requirements: *Must be a resident of Mecklenburg County *Must have a minimum 3.0 grade point average *Must be interviewed by the Scholarship Committee (to be scheduled) *Must submit an official transcript and SAT/ACT test scores *Must be admitted to North Carolina Central University *Must submit two letters of recommendation from a North Carolina Central University Alumnus, counselor, teacher, coach, clergy, employer, etc. Recommendation **CANNOT** be from a family member or friend.

Ms. Fredicia Caldwell, Scholarship Chairperson North Carolina Central University Charlotte Alumni Chapter Email Address: **scholarship@nccucharlotte,org**

Mr. Brian McCorkle, President North Carolina Central University Charlotte Alumni Chapter Email Address: **bmccorkle@nccucharlotte,org**

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Scholarship Application		
Application Deadline: Friday, May 15, 2015		
(Please type/print clearly)		

Name	Date	
Address		
Phone Number	Mobile Number	
Email Address		
Parent/Guardian's Name		
Email Address		
High School		
Counselor's Name	School P	hone Number
Cumulative GPA	(weighted)	(unweighted)
Class Rank		
SAT: Verbal/Critical Readir	ng M	Iath
ACT: English	_ Math Com	posite
Intended Major		

 $^{***}\mbox{For}$ the next section, please type your answers and your essay and attach them to the application ***

What motivates you toward this major, or what are your career goals in this educational area?

List pertinent scholarly accomplishments (academic awards, science projects, special summer programs, etc.)

List extracurricular activities, special awards, or recognitions received (Boys/Girls Scouts, Debate, athletics, clubs, hobbies, etc.)

List any musical instrument you play_____

Leadership positions held during current and previous school years

Other leadership positions held _____

Community involvement _____

Employment: Describe and include number of hours worked per week

Essay(500 words or less) – Please describe what is important to you. You may include special interests, talents, goals or unique experiences.

I certify that the information provided on this form is true to the best of my knowledge.

Signature	Date		
Parent Signature	Date		

"Truth & Service" www.nccucharlotte.org Recommendation Sheet (2 Required)

Applicant should complete the top portion before giving to the person providing the recommendation

Name	Date
Address	
Form due by	

Please provide your recommendation. Attach an additional sheet if necessary. Please place recommendation in a sealed envelope before returning it to the applicant.

- 1. Describe your relationship to the applicant.
- 2. Applicant's personal character.
- 3. Applicant's intellectual or academic ability.

Your name, title, and address:

Signature _____