

Florida A&M University National Alumni Association Miami-Dade Chapter

PO Box 680938
Miami, FL 33168-0938



"Excellence With Caring"

2019 Scholarship Application

CAP Advisors, Parents, Students, and Community Partners,

Please find enclosed the Florida A&M University National Alumni Association Miami-Dade Chapter Scholarship application form. All students who meet the minimum criteria are encouraged to apply. Please adhere to the deadline. Applications are due by **April 27, 2019. That is the absolute deadline!**

Thank you for your full cooperation and participation in this endeavor.

Sincerely,

Ron Butler
Committee Chairperson

Denetra Collins
Chapter President

Enclosure

Scholarship Applicants Must Meet The Following Criteria

These scholarships are awarded to graduating high school seniors and current FAMU students who have demonstrated a combination of academic achievement, leadership, and a financial need.

Student must:

- graduate from a high school public/private in Miami-Dade County
- be a current full-time student at FAMU from Miami- Dade County
- demonstrate financial need

FAMU National Alumni Association- Miami-Dade Chapter Scholarship Application

Submit Completed Application by
E-mail or mail: (email preferred)

FAMU, Miami-Dade Chapter
Scholarship Committee
PO Box 680938
Miami, FL 33168-0938
Email: mdfamunaa@gmail.com

For questions contact:
Ron Butler, Scholarship Chair
Email: mdfamunaa@gmail.com

Instructions: Please attach the following items:

1. Copy of high school transcript/student history (current FAMU students copy of most recent transcript)

2. 500-word essay answering the following question:
What do you have to offer Florida A&M University?

3. Three (3 letters of recommendation) from teacher, counselor, community leader, advisor to organizations, or employer. Additionally, if you have a family member that is an alumnus of FAMU, please indicate name and email address at the bottom of application.

4. Resume Academic accomplishments/extracurricular activities (ex. awards, school and/or community clubs/organizations, affiliations, employment and other financial scholarships/awards)

5. Lunch Status please mark/highlight which apply:
 Free Reduced Full Rate

This is a PDF fillable form.

Name: _____ Date: _____

Home Address: _____

City: _____ Zip Code: _____

Telephone #: _____ Email: _____

High School: _____

G.P.A.: _____ Test Scores: ACT (R) _____ ACT (M) _____ SAT (R) _____ SAT (M) _____

Intended Major: _____

Parent/Guardian: _____

Parent's Email: _____ Parent's Phone #: _____

Name of Relative
FAMU grad (if applicable) _____ Email: _____