



Scholarship Application

2020

ORANGE COUNTY AFRICAN AMERICAN COMMUNITY CENTER, INC.

Purpose of Scholarship

This scholarship fund is established to honor outstanding seniors who are Christian active members of participating churches. The award is given to **high school** seniors seeking their education in an accredited place of higher learning (i.e. college or university; vocational or trade school).

Criteria for Qualification:

1. **Applicant** must be a high school senior who is completing high school in the year of the application.
2. **Applicant** must have a minimum **2.5 GPA as determined by the last grading period**. **Please submit official sealed copy of transcript.**
3. **Applicant** must have been an active participating member (in good standing) at his/her church for at least one year upon applying.
4. **Applicant** must submit:
 - a. Signed letter of reference from a teacher, counselor, or principal on school letterhead.
 - b. Letter of reference from a ministry leader at the student's church on church letterhead.
 - c. Recent picture of himself/herself.
5. **Applicant** must submit an essay (between 250 and 300 words) which should answer the following question:

Essay Question and Instructions

Prompt: *How has your Christianity made an impact on or influenced your school life?*
(Please cite specific examples, incidents or experiences.)

Your essay should begin with a short auto-biographical paragraph.

Be sure to type your essay using Calibri or Times New Roman – 12 pt. font/double spaced.

- **Applicant** must submit a completed application packet – postmarked no later than **Saturday, April 11, 2020**.
- **Late** or incomplete application packets will **not** be reviewed by the Scholarship Committee.
- **Decisions** of the Scholarship Committee are **final**.



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Applicant must present **VERIFIABLE PROOF** of intention to attend a college, university, or trade school (i.e. registration receipt and/or class schedule) before he/she receives final award. **Scholarship awards will be disbursed between the months of August through October. Failure of Applicant to present verifiable proof of class schedule will result in forfeiture of Applicant's Scholarship Award.**

**Include all attachments as listed in the Criteria for Qualification in ONE envelope.
Mail completed application packets to:**

**ORANGE COUNTY AFRICAN AMERICAN COMMUNITY CENTER, INC.
1057 E. Imperial Hwy.
Suite 452
Placentia, CA 92870**

OCAACCI SCHOLARSHIP APPLICATION

Please print or type in blue or black ink

Personal Information

Applicant Name: First _____ Middle Initial _____ Last: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ E-mail: _____

Date of Birth: Month _____ Day _____ Year _____

Church of Record: _____ Membership (approximate year joined) _____

Academic Information:

High School: _____ City _____ Phone _____

Graduation month/year: _____ High School GPA (4.0 scale) _____

Prospective College or School of Higher Learning: _____

Authorization Information:

(Initial) _____ I understand that in order to become a recipient of this scholarship, I must meet all of the scholarship eligibility requirements, and I must be selected by the scholarship committee. All selections are final. I understand that my name and any information provided on this application must be mailed and postmarked to Orange County African American Community Center, Inc. (OCAACCI) to the address listed below **no later than Saturday, April 11, 2020**. If awarded a scholarship, I release to OCAACCI the right to use my name, story, and picture for Foundation-related printed materials, videos, reports (oral or written) and press releases without compensation. I also recognize the advisability of communicating a **letter of appreciation** to OCAACCI, the donor of the scholarship.

I certify that all statements on this application are true and honest to the best of my knowledge.

Student Signature _____ Parent/Guardian Signature _____

**ORANGE COUNTY AFRICAN AMERICAN COMMUNITY CENTER, INC.
1057 E. Imperial Hwy., Suite 452
Placentia, CA 92870**

Scholarship Committee Only

Application postmark (date) _____	Scholarship Award Granted (date) _____
Scholarship Award Denied _____	Explanation: (See attached letter) _____
James Johnson, CEO, OCAACCI _____	
Andrea L. Smith, Chairperson, OCAACCI _____	
Annie Allen, Scholarship Committee Chairperson, OCAACCI _____	
Gary Smith, Scholarship Liaison Coordinator, OCAACCI _____	