



Santa Cruz County Branch

NAACP SANTA CRUZ COUNTY BRANCH SCHOLARSHIP APPLICATION

Application Year:	Phone No:		
Name:	M_____ F_____ Non-binary	Date of Birth:	
Address:		SSN:	
City:	State:	Zip Code:	
High School:	City:	State:	
Do you or any family member belong to the NAACP? Yes:_____ No:_____		If Yes, who:	
Parents/Guardians Name(s):		Relationship to Applicant:	
Date of Graduation or Completion of GED:		(Submit high school transcript or GED score)	
College/Technical School you plan to attend:		Have you been accepted? Yes:_____ No:_____	
List all financial aid you are currently receiving or plan to receive (Pell Grant, Scholarships, Loans, Tuition Waiver):			
List School or Community Activities:			
List Jobs held in high school, with hours worked weekly:			
Job	Place	Duties	Hours Worked

Please Read Carefully

I certify that the statements herein are true to the best of my knowledge and grant my permission for the information contained herein to be shared with the NAACP Santa Cruz County Branch Scholarship Committee. If awarded an NAACP Santa Cruz County Branch Scholarship, I understand that I must meet their Standards of Academic Progress. I understand information from my academic history may be released to the Scholarship Committee, as well as Executive Committee members. If awarded a scholarship, I release to NAACP Santa Cruz County Branch the right to use my name and picture for publications, reports, and press releases. I also agree to write progress reports each semester that I receive aid.

Applicant's Signature: _____

Important: Please have two letters of recommendation sent to the PO Box below, with your completed application. One recommendation must be from an instructor, preferably on your school's letterhead. The other must, be from an established resident of Santa Cruz County.

All material requested must be enclosed or sent electronically with your completed application, and received by the deadline date of **Saturday, June 1, 2024**.

**NAACP Santa Cruz County Branch
Attn: High School Scholarship Committee
PO Box 1433
Santa Cruz, CA 95061-1433
santacruznaacpscholarship@gmail.com**