## Association of Nigerian Physicians in the Americas - ANPA CAROLINAS Scholarship Application

You must type or print all your answers neatly in ink. Application response must be sent via email to: anpascholars@gmail.com

## I Personal Information

1. Name: $\qquad$ , $\qquad$ First M.I.
2. Mailing Address: $\qquad$
$\overline{\text { City }} \cdot \frac{\text { Number and street }}{\text { State }} \cdot \frac{\mathrm{Zip}}{}$
3. E-mail: $\qquad$
4. Phone: $\qquad$
5. Birth Date: Month $\qquad$ Day $\qquad$ Year $\qquad$
6. Gender: M $\qquad$ F $\qquad$
7. Race: $\qquad$
8. Do you have a relationship with anyone affiliated with ANPA? Y $\qquad$ / N $\qquad$

If any, please identify the person. Name: $\qquad$
9. Name of Parents or Legal Guardians:

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## II School Information

10. High School Attended: $\qquad$
11. Current Year in High School: Senior $\qquad$
12. I am Attending the following College/University in the fall of 2023:
(Applicant must register at a college or university; Need proof of admission)

## III Student Information

13. Most recent cumulative GPA of $\qquad$ on the scale of 4
14. Future Major area of study $\qquad$
15. List school and community service activities, hobbies, Volunteer work, honors, extracurricular, and offices held.
Type here

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16. Essay: Describe How Community Service has made an Impact on your life (maximum 500 words only).
Type here

Statement of Accuracy: I certify that all information I have provided on this form is true and complete to the best of my knowledge. I agree to give proof of the information on this application if requested. I give permission to selection committees to review information on this form, my transcripts, and any additional supporting documentation submitted as part of this application. I give permission for selection committees to contact my high school for additional academic information. If chosen for scholarship award, I agree to provide proof of GPA to the committee for the committee to determine eligibility. If selected applicant agrees to personal interview with the selection committee in person, phone, or virtual.

Signature $\qquad$ _

## Purpose of Scholarship:

A merit-based scholarship to offer financial aid to minority high school students of African descent. To support the pursuit of higher education for students entering the freshman year of college in the fall.

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\begin{aligned}
* * * S c h o l a r s h i p ~ r e c i p i e n t s ~ r e c e i v e: ~ & \$ 2,500 \text { (1st) } \\
& \$ 2,000 \text { (2nd) } \\
& \$ 1,500 \text { (3rd) } \\
& \$ 1,000 \text { (4th \& 5th) }
\end{aligned}
$$

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## Criteria for Eligibility

- Applicant must be an African American that resides in North or South Carolina
- Applicant must be a senior in high school
- Applicant must show a proven record of academic and service in the community
- Must have a minimum cumulative GPA of 3.5 or higher on a scale 4
- Applicant must be attending college or university
- Applicant must be accepted to a college or university in Fall 2023 and show prove of admission
- First degree relatives of ANPA members are excluded from this scholarship.


## Application Process

Applicant must submit completed application form to Email: anpascholars@gmail.com

- Two-character references letter of recommendation one from school and one from community service supervisor
- Submit copy of the most recent unofficial transcripts with GPA indicated
- Summit personal essay limit of 500 words
- Applicant must agree to an interview with the selection committee


## Application Deadline

- Application deadline is on May 19, 2023. Completed application with attachments must be received on May 19, 2023 latest 11:59 PM ET . If received later, applicaion will be disqualified. Thank you.
- Incomplete and illegible application will not be considered
- Applicant will be notified by email or phone in June regarding status of application
- Scholarship recipients will be announced by June $15^{\mathrm{TH}}$.
- Please email your application to anpascholars@gmail.com

