ILLINOIS LEGISLATIVE BLACK CAUCUS FOUNDATION

Scholarship Application

Scholarship Eligibility:

Foundation Board Members

Paul Williams

Chairman of the Board

Rep. Esther Golar

House Chairwoman

Sen. James Meeks

Senate Chairman

Senator Toi Hutchinson

Senate Secretary

Rep. Deborah Graham

Treasurer

Representative Will Davis

Joint Chairman

Board of Directors

Coy Pugh Shirley Jones Robin Kelly Jesse Madison



Selection Committee

Applicants should be an accepted or enrolled student at an accredited institution of higher learning to include community colleges, private institutions and certified vocational training programs.

ILBC Members (and their *immediate relatives), ILBC employees (and their *immediate relatives), and ILBC Foundation members (and their *immediate relatives) are ineligible for the scholarship program.

How to Apply:

Contact Ms. Jackie Brown at 217/544-0444. You can also write to the Illinois Legislative Black Caucus Scholarship Selection Committee, P.O. Box 12104, Springfield, IL 62791 to request an application.

All applicants must:

- Be an Illinois resident
- Complete the ILBC Scholarship Application
- Submit to ILBC verification of enrollment or letter of acceptance
- Write a personal statement (500 words or less) describing interest and involvement in community and public service, hobbies, special talents, sports and/or school activities etc. The statement should address future academic and professional career plans and may highlight any personal challenge(s) perspective has overcome
- Submit two letters of recommendation from persons other than relatives
- Applicants should submit a recent photograph of himself/herself
- Provide proof of voters registration if 18 years of age or older
- Forward the application and supporting materials to the ILBC Scholarship Selection Committee by April 1st
- Any Omission not summated with application will cause disqualification.

Application Deadline:

All prospective applications for the scholarship must be postmarked by **April 1**ST of each year.

<u>Submit Applications to:</u> Illinois Legislative Black Caucus Scholarship

P.O. Box 12104, Springfield, IL 62791.

*Immediate relatives: mother, father, sister, brother, grandmother, grandfather

Scholarship Application

Please print. Complete form in detail filling in all appropriate blanks, be as specific as possible. **PERSONAL DATA:** Full Name _____ ______Male___ Female___ Permanent Street Address State Zip Telephone Number _____Emergency Number _____ Date of Birth (Month/Day/Year) _____Place of Birth_____ Age _____ - ___ Social Security Number ____ - ___ - ____ - ___ Father's Name (if applicable) ______ Occupation _____ Mother's Name (if applicable) _____Occupation ____ Please tell us how you learned about the ILBC Scholarship_____ **EDUCATION:** Did you graduate? __Yes ___No Address Name of High School _Did you graduate? __Yes ___No Name of College Address _____Did you graduate? __Yes ___No Address Vocational/Trade Pre-Apprentice Official Classification (circle one) Apprentice Other 2. List the school you will attend or are attending: School Location Scholarship recipients must gain admission to an accredited college, university, or trade. 3. List your area of study 4. Personal Statement (Separate Sheet 500 words or less) describing interest and involvement in community and public service. **CERTIFICATION:** I hereby certify that all information in this application is true and accurate.

ALL INFORMATION GIVEN WILL BE HELD IN STRICT CONFIDENCE.

Date

Applicant Signature

Date

Applicant Name (print)