



Linked in Friendship, Connected in Service
Southern Area

PLEASE INCLUDE THE FOLLOWING WITH YOUR APPLICATION AND FORWARD ALL DOCUMENTS TO: hbcuscholars@salinksinc.org

1. Demographic Information (see page 2 of application)
2. Current School Transcript
3. Personal Statement (500 - 1,000 words): Please address how you plan to use your degree to support your community upon graduation.
4. Verification of Citizenship:
 - a. Acceptable proof of citizenship includes a scanned copy of **one** of the following:
 - b. US birth certificate • Current U.S. passport • State driver's license
5. CV or Resume
6. Two Letters of Recommendations (sent directly to The Links, Incorporated at hbcuscholars@linksinc.org)
 - a. One recommendation letter should be sent from a dean, faculty member, or chief administrative officer from your academic institution (on university letterhead).
 - b. The second recommendation letter should be sent from a community leader or volunteer supervisor. If a community leader or volunteer supervisor is unavailable, a second letter from a dean, faculty member or school administrative officer is acceptable.
7. Financial Documents Student Aid Report (SAR) from the U.S. Department of Education (if you received federal loans)
8. Financial Aid Summary (see form on page 3)

Application Opens: August 15, 2018

Application Timeline: August 15 - September 7, 2018

Applications with all supporting documents are due and must be submitted no later than 11:59 P.M. (ET) to hbcuscholars@salinksinc.org by September 7, 2018

Awardees will be notified by mail. In order to receive the award, honorees must submit a letter of acknowledgement postmarked by September 20, 2018 to the attention of:

Anne Turner Herriott
Area Director
Southern Area of The Links, Incorporated
P. O. Box 694070
Miami, FL 33269



Linked in Friendship, Connected in Service
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Application Demographic Information

Date: _____

Name: _____ DOB: _____

University School: _____

Expected Graduation: _____ email: _____

Current Address: _____

Street: _____

City: _____ State: _____ Zip: _____

Permanent Address: _____

Street: _____

City: _____

State: _____

Zip: _____

High School Attended:

Name : _____ City: _____ State: _____

Honors/Awards:

Volunteer Experience

Location	Dates
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Financial Aid Summary

Instructions: Applicants to the Southern Area Links, Incorporated HBCU scholarships must document financial aid received during their professional school degree program. The applicant has provided the name and contact information of a Financial Aid Officer to complete the following form, and agreed to the disclosure of the below information. Once completed, the Financial Aid Officer needs to upload this document using the link provided via email. **If you have questions or concerns, please contact: hbcuscholars@salinksinc.org**

Scholarship Applicant's Name: _____
Last First MI

Scholarship Applicant's Anticipated Year of Graduation: _____

The award information requested below cannot be provided because (select one):

Student did not apply for aid *Student was not eligible for aid* *No funds available*
Other: _____

Sources of Assistance	Award Years and Amounts of Assistance				
	Year: _____	Year: _____	Year: _____	Year: _____	Year: _____
Grants, Loans, and Scholarships <i>Example: Federal Stafford – Unsubsidized</i>					
TOTAL GRANTS/SCHOLARSHIPS					
Expected Family Contribution					
Unmet Need					

Please itemize the actual cost to be incurred by the student at your institution this year:

Student Budget			
Tuition	\$ _____	Room and Board	\$ _____
Fees	\$ _____	Indirect/Misc.	\$ _____
Total School Approved Budget			\$ _____

Is this student subject to higher non-resident tuition cost? YES NO

Comments: _____

Name of Form Submitter: _____ Title: _____

School: _____ Tel.: (_____) _____ - _____ ext. _____

Signature: _____ Date: _____, 20____