**The Shareyna Nicole Scholarship**

Shareyna Nicole is an author, professor, advocate, philanthropist, and motivator. Shareyna Nicole’s work inside and outside of the classroom is centered on impacting women (of all ages) in the areas of empowerment through scholastic aptitude, leadership and community impact.

***The Annual Shareyna Nicole Scholarship*** award provides between $250 and $500 to one high school female on the basis of her scholastic aptitude, leadership, and impact on her local community. The award is meant to support expenses for college.

**CANDIDATE ELIGIBILITY**

* Must be a female
* Must graduate from high school this academic year
* Must currently have at least a B weighted grade point average
* Must demonstrate plans to attend a post-secondary institution

**CRITERIA**

* Completed scholarship application
* Two letters of recommendation
* Current (unofficial) high school transcripts
* Demonstrate progressive academic achievement
* Demonstrate involvement in local community

**PROCEDURE**

* Submit application, transcript, and two letters of recommendation by **April 1st.**
* Finalists will be notified of application status in early June.
* Awardee will be provided with scholarship by **August 31st**.

**EDUCATION POSTPONEMENT**

If the winner chooses to postpone her college education, the scholarship may be reserved for up to one year from the date of graduation.

**The Shareyna Nicole Scholarship**

Scholarship candidates must either type or print the application in blue or black ink. Application response may be sent via email to info@shareynanicole.com (as an attachment) or mailed ***to The Shareyna Nicole Scholarship; PO Box 3103, Linden, NJ 07036***. Scholarship application, transcripts and letters of recommendation must be postmarked by **April 1**.

**Applicant Information:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First M.I.

Permanent mailing address:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

City State Zip

Phone Number (parent/guardian if under 18 years of age): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email (parent/guardian if under 18 years of age): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthdate: \_\_\_\_\_\_ Month \_\_\_\_\_\_\_\_\_\_\_\_\_ Day \_\_\_\_\_\_\_\_\_\_\_\_ Year

High School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Grade Point Average: \_\_\_\_\_\_\_\_\_\_\_

List any awards/honors:

1.

2.

3.

4.

Colleges/Universities where applications are pending:

* 1. College/University name
	2. College/University name
	3. College/University name

Anticipated Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REQUIRED ATTACHMENTS:**

1. Letters of Recommendation: Please provide one letter from a teacher and/or school official. Please also provide one letter from a family member or family friend.
2. List of volunteer/community involvement.

**APPLICANT CERTIFICATION:**

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 high school and/or college officials for additional academic information. I further agree if chosen to submit a written paragraph to be published on the value of the scholarship award in my academic pursuits.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature (parent/guardian if applicant is under 18 years of age) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_