

The Scholarship Awards and Student Aid Committee
is pleased to announce open competition for the
**100 Black Men of Long Island, Inc.
Scholarship**

In the amount of:

\$200

Scholarship requirements:

- You are either a full-time or part-time student
 - You are in good academic standing
 - You have a cumulative GPA of at least 3.2 for all courses taken at NCC
 - You are majoring in an area of Allied Health Sciences, Biology, Chemistry, Environmental Science, Nursing or Physics
 - You are an African American male
 - An essay describing your educational and personal accomplishments as well as your career goals
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Number of 100 Black Men of Long Island, Inc. Scholarships Available: 1

Filing Deadline:
1:00 PM
Thursday, October 11th, 2012

Applications available at:

- The College Website (<http://www.ncc.edu/myncc>)
- The College Center Building (CCB Room 150)
- The Transfer Office (Nassau Hall)
- The Honors Program Office (Bradley Hall, Room 1)
- The Library
- All Academic Departments
- The NCC Foundation Office (364 Rice Circle)
- The Financial Aid Office (3rd Floor, Tower)

Completed applications must be returned to the
Financial Aid Office (3rd Floor, Tower)

Scholarship Informational Workshop, 9/20/12, G111, 11:30 am

NASSAU COMMUNITY COLLEGE
ONE EDUCATION DRIVE
GARDEN CITY, NEW YORK 11530-6793
ACADEMIC SENATE SCHOLARSHIP AWARDS AND STUDENT AID COMMITTEE

**STUDENT APPLICATION FOR THE
100 BLACK MEN OF LONG ISLAND, INC. SCHOLARSHIP**

In order to qualify for this scholarship, **all** of the following information **must** be provided and be legibly written or typed. Failure to do so will result in disqualification of your application.

A. PERSONAL DATA:

Please ensure that the information below is accurate as it will be used to notify the awardees.

1. Mr. / Mrs. / Ms. _____
(Circle One) FIRST NAME MIDDLE INITIAL LAST NAME
2. HOME ADDRESS _____
 STREET CITY STATE ZIP
3. TELEPHONE # (_____) _____
4. MY NCC BANNER NUMBER - N _____
5. AREA OF CONCENTRATION – MAJOR COURSE OF STUDY _____
6. CUMULATIVE GRADE POINT AVERAGE AT NCC (at least 3.2 to qualify) _____
7. ARE YOU AN AFRICAN AMERICAN MALE? YES _____ NO _____
8. NUMBER OF LABORATORY SCIENCE CREDITS ALREADY COMPLETED AT NCC _____

B. ESSAY STATEMENT: Please submit a *typed* essay describing your educational and personal accomplishments and your career goals. Remember this is a scholarship application; spelling and grammar are important. Be sure that the essay is clear and concise. The format is 1 to 2 pages, double-spaced, 12-point Times New Roman font and one-inch margins.

C. SIGNATURE: By signing below I certify the following is true to the best of my knowledge:

- The information submitted on this form is complete and all attachments are accurate.
- I have reviewed the criteria for this scholarship and believe I meet all requirements. I understand that my application will not be read if the criteria are not met. Requirements include (but are not limited to):
 - a. cumulative GPA of at least 3.2 for all courses taken at NCC
 - b. majoring in an area of Allied Health Sciences, Biology, Chemistry, Environmental Science, Nursing or Physics
 - c. an African American male
- I understand that failure to include any required documentation will result in disqualification and my application will not be read.

SIGNATURE _____

D. REQUIRED DOCUMENTATION: All of the following must be included (**additional materials not required for the application will be disregarded**)

- ☐ YOUR TYPED ESSAY
- ☐ A COPY OF YOUR MOST RECENT MYNCC BANNER TRANSCRIPT INCLUDING THE COURSES YOU ARE REGISTERED FOR THIS SEMESTER. A BANNER DEGREE EVALUATION WILL NOT BE ACCEPTED.
- ☐ A SELF-ADDRESSED STAMPED ENVELOPE (USE APPROPRIATE POSTAGE)
- ☐ SIGNED APPLICATION

FAILURE TO INCLUDE ANY OF THE ABOVE WILL RESULT IN DISQUALIFICATION AND YOUR APPLICATION WILL NOT BE READ.

SUBMIT YOUR COMPLETED APPLICATION TO THE NASSAU COMMUNITY COLLEGE FINANCIAL AID OFFICE (TOWER BUILDING, 3RD FLOOR) NO LATER THAN 1PM, THURSDAY, OCTOBER 11, 2012.

COMMITTEE USE ONLY	COMMITTEE USE ONLY	COMMITTEE USE ONLY
IS THE APPLICATION COMPLETE? YES _____ NO _____		
PLEASE LIST MISSING ITEMS _____		
DOES THIS APPLICATION MEET DONOR CRITERIA? YES _____ NO _____		
IF NOT, WHY? _____		
REVIEWER'S COMMENTS:		
A. INITIALS _____ DATE _____ RATING _____		
COMMENTS _____		
B. INITIALS _____ DATE _____ RATING _____		
COMMENTS _____		
C. INITIALS _____ DATE _____ RATING _____		
COMMENTS _____		