



## Kentucky State University Louisville Alumni Chapter High School Student Scholarship Application

**PURPOSE:** The Scholarship was established to provide assistance to a deserving African American high school graduate and enable the student to complete his/her educational objectives at Kentucky State University.

**SCHOLARSHIP INFO:** All applications will be reviewed by the Scholarship Committee of the Kentucky State University Alumni Association, Louisville Chapter. Scholarship amounts will be awarded from \$500.00 up to \$2000.00, based on availability. **Monetary awards are payable to Kentucky State University, not individual scholarship recipients in two equal disbursements.** Disbursements are processed in the fall and spring semesters. Verification of enrollment must be presented for payment.

**ELIGIBILITY CRITERIA:** The application must be completed by the student applicant and meet all criteria outlined below to be eligible for this scholarship.

1. Must be a resident of Jefferson or bordering Kentucky counties.
2. Must be a graduating high school senior
3. Minimum cumulative GPA of 2.5 verified by official high school transcript
4. Must have a Letter of Acceptance (copy) from Kentucky State University
5. Application must be complete. Incomplete applications will not be reviewed.

### **APPLICATION PROCEDURE: All applicants must submit the following**

- (1) Completed application
- (2) An **official** high school transcript that includes the first semester grades, weighted cumulative GPA, and test scores (sent electronically or in a sealed envelope if mailed)
- (3) Two (2) Letters of Recommendation
  - One (1) from an adult who knows the student (this should not be a family member)
  - One (1) from a high school Administrator; Principal, Counselor, Teacher or Coach
- (4) Mail or electronically submit the completed application, the checklist, and all supporting documents by the deadline, March 27, 2023, to [kysulacscholarships@gmail.com](mailto:kysulacscholarships@gmail.com).

**Mailing Information: Postmark date: March 27, 2023**

**Attn: Scholarship Committee**

**KSU Alumni Association, Louisville Chapter**

**P. O. Box 21185**

**Louisville, KY 40221**



## Kentucky State University Louisville Alumni Chapter High School Student Scholarship Application

### Section I - Applicant Information

*Please print legibly or type*

**Name:** \_\_\_\_\_  
(First Middle Last)

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone Numbers:** Home-( ) \_\_\_\_\_ - \_\_\_\_\_ Cell-( ) \_\_\_\_\_ - \_\_\_\_\_ **Date**

**of Birth:** (MM/DD/YYYY) \_\_\_\_/\_\_\_\_/\_\_\_\_

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### Section II - School and Community Information

**Name of High School:** \_\_\_\_\_

**Address** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Date of**

**Graduation:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **GPA:** \_\_\_\_\_

**Counselor:** \_\_\_\_\_



**List Honors/Awards Received with the past 3 years:** *(you may attach additional pages if needed)*

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**List Extracurricular Activities and Office(s) held at school:**

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**List Community/Church/Civic organizations/activities you have participated in and any offices held:**

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**Have you been awarded any other scholarships and/or grants?**

No  Yes, list them below

Source; Organization and/or Group amount of the Award

**List of Colleges/Universities to which you have already applied.**

**What is your intended College Major?** \_\_\_\_\_





## High School Student Scholarship Application Checklist

*Check off each item and Include this checklist with your application.*

**Incomplete applications will not be considered**

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

I am submitting the following documents as part of my application for the Kentucky State University, Louisville Alumni Chapter Scholarship, and certify that all statements are true and correct.

Applicant Signature: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

1. Scholarship Application Checklist with Signatures
2. Completed KSU Scholarship Application
3. 1 Letter of Recommendation from an Adult who knows you
4. 1 Letter of Recommendation from School Administrator
5. Official High School Transcript (submitted electronically or in a sealed envelope)
6. Letter of Acceptance from Kentucky State University
7. Essay

Parent / Legal Guardian Certification (if student is under 18 years of age)

I consent to my child's application for a scholarship and understand, if awarded, the funds will be payable to Kentucky State University. I certify that the foregoing documents and statements are correct.

\_\_\_\_\_  
Parent/Legal Guardian **Printed** Full Name Phone Number

\_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Parent/Legal Guardian Signature *Month Day Year*

**Mailed applications must be postmarked by March 27, 2023.**

Electronic applications, including all supporting documents, should be submitted by March 27, 2023, to  
[kysulacscholarships@gmail.com](mailto:kysulacscholarships@gmail.com).

The subject line should be titled Scholarship Application and your initials *Scholarship  
Committee C/O KSU Alumni Association*

*Louisville Chapter  
P. O. Box 21185 Louisville, KY 40221*