

**ABENY, INC.
ASSOCIATION OF BLACK EDUCATORS OF NEW YORK
NORA BARNES, PRESIDENT**

ABENY SCHOLARSHIP APPLICATION 2017

On Saturday, June 17, 2017, the Association of Black Educators of New York will sponsor its 42nd Annual Scholarship and Awards Luncheon at Antun's located in Queens Village, New York. At this event, ABENY will honor outstanding educators and high school seniors in the public schools.

To apply for an ABENY scholarship, the graduating senior must submit the following required documents to the Scholarship Committee Chair at the address designated at the end of this letter:

1. The completion of both sides of the attached scholarship application form.
2. The submission of a composition of no more than one 8 ½ x 11 typewritten page in which the student explains why he/she should be awarded a scholarship. (It is recommended that the student write "Scholarship Essay" as the title of this composition).
3. An official copy of the candidate's academic record and his/her latest SAT scores. It must be signed by a school official and/or contain the school's official seal.
4. At least four letters of recommendation. Two of the letters must be from school personnel and two from community representatives.
5. A resume which includes extra-curricular activities, community service and school service. (Please include an e-mail address).
6. An original (not xeroxed) black and white or color passport size photograph, which will be included in our journal if the applicant is a scholarship winner. It is recommended that the student write his/her name on the back of the photo and clip it to the application.
7. All applications should be mailed in a 9 x 12 inch envelope (with adequate postage), and postmarked no later than April 30, 2017. Please note that all materials become the property of Association of Black Educators of New York and will not be returned.

If you have questions, or would like to receive an application, please call Dr. Sheilah Bobo, Scholarship Chair, at (917) 412-9099. Emails: sheilahbobo@gmail.com and sbobo@schools.nyc.gov.

Applications should be sent to:

**Dr. Sheilah Bobo
Chair, ABENY Scholarship Committee
454 East New York Avenue Brooklyn, NY 11225**

ABENY, Inc.
Association of Black Educators of New York
Nora Barnes, President

ABENY SCHOLARSHIP APPLICATION
(Please print with black ink)

Name _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

Date of Birth _____ Place of birth _____

Student's email address _____

Parents/Guardian

Father/Male Guardian

Mother/Female Guardian

Occupation Father/Male Guardian

Occupation/Female Guardian

Address Father/Male Guardian

Address Mother/Female Guardian

City State Zip

City State Zip

Phone # Father/Male Guardian

Phone # Mother/Female Guardian

Number of Siblings: ____ **Parents/Guardian Total Yearly Income:** _____

SCHOOL INFORMATION

Name and Address of High School: _____

Name of Principal _____

TEST INFORMATION

Have you taken the SAT? (Circle One) Yes/No Verbal score ____ **Math** ____
(Be sure to attach an official copy of your scores as indicated on page 3)

Name of College(s) and/or Universities to which you applied

_____	_____	_____
Name of College	Name of College	Name of College
_____	_____	_____
City and State	City and State	City and State

EXTRACURRICULAR ACTIVITIES in which you are presently active (use additional pages if needed).

School Activities: _____

Community Activities: _____

Offices Held and Honors Received: _____

REMINDER: CHECK OFF THAT THE FOLLOWING DOCUMENTS HAVE BEEN SUBMITTED ALONG WITH THE APPLICATION:

___ A composition of no more than one 8 ½ x 11 typewritten page in which the student explains why he/she should be awarded a scholarship.

___ An official copy of the candidate's academic record and his/her latest SAT scores. It must be signed by a school official and/or contain the school's official seal.

___ At least four letters of recommendation. Two of the letters must be from school personnel and two from community representatives.

___ A resumé which includes extra-curricular activities, community service and school service. (Please include an e-mail address).

___ A black and white or color passport size photograph, which will be included in the Scholarship and Awards Journal if the applicant is a scholarship winner.

I hereby state that the information contained in this application is true and correct to the best of my knowledge.

_____	_____	_____	_____
Signature of Student	Date	Signature of Parent/Guardian	Date

RETURN APPLICATION TO:

Dr. Sheilah Bobo, Chairperson, ABENY Scholarship Committee
454 East New York Avenue Brooklyn, New York 11225 Cell: (917) 412-9099

DEADLINE DATE: APPLICATION MUST BE POSTMARKED NO LATER THAN APRIL 30, 2017. CONSIDERATION WILL BE GIVEN ONLY TO CANDIDATES SUBMITTING A COMPLETE APPLICATION PACKAGE WHICH INCLUDES ALL ITEMS ENUMERAGTED ON THIS FORM.

ABENY, INC.
Association of Black Educators of New York
Nora Barnes, President

DISCLAIMER

Please note that Federal law prohibits ABENY, as a tax-exempt organization, from awarding scholarships to students who are related to our Executive Board members, as follows:

EXECUTIVE BOARD, 2015-2017

- 1. Nora Barnes**
- 2. Dr. Sheilah Bobo**
- 3. Evelyn (Pat) Hairston**
- 4. Eulene Inniss**
- 5. Margie Jackson**
- 6. Pearl Jones**
- 7. Victor Jordan, J.D.**
- 8. Dr. JoAnn Joyner**
- 9. Larcelia Kebe**
- 10. Mary Montgomery**
- 11. Mellouise Murdaugh**
- 12. Clarence A. Robertson**
- 13. Mable W. Robertson**
- 14. Shameek Robinson**
- 15. Aletta Seales**
- 16. Leroy Smith**
- 17. Yvonne (Ivy) Sterling**
- 18. Adrian Straker**