The scholarship for the Alliance of Black School Educators of Wake County is awarded to students of African American descent to promote the mission of enabling high academic achievement. Selected high school seniors in the Wake County Public School System will be awarded $1000 scholarships.

This application will include essays that will be reviewed by a selection committee. Each member will score essays using criteria such as clear and concise responses to all topics and consider completed application with required documents.

All applicants must submit the following required documents:

* the completion of this form and parent signature
* an acceptance letter from a college or university
* a letter of recommendation from a teacher, a counselor, or community member (which includes an objective perspective about the qualities of the applicant from a person who is not a friend or family member)
* one-page (typed and double spaced) essay that includes the following topics: **Your Leadership Qualities/Experiences**, **Community Service Experiences**, and **Why You Should Receive the Scholarship**. Consider writing this essay in a narrative format. *Scan and send your essay, this application, one recommendation letter, and a copy of your acceptance letter to the email address below before the deadline* *of* **12pm on April 3, 2023.**

Email completed application to: **wakeabse@gmail.com**

**Student Information**

Please print.

First and Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Photo/Video Release - This should be completed by the parent or legal custodian. Check one.**

\_\_\_\_\_\_I deny permission to use my child’s image for display, publication, or release to media.

\_\_\_\_\_\_I grant permission for use of my child’s image in print, web content, video and/or digital

media. I understand that my child’s image may be used or released by the Alliance of Black School Educators without additional notification and that my child’s name may appear along with a photograph or video.

Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_