



## Lawrence Branch NAACP Scholarship Requirements

The Lawrence Branch of the NAACP offers a \$1500 scholarship to one African American student at Lawrence Free State High School and Lawrence High School. Applicants must plan to attend any accredited vocational, technical, or post-secondary institution. Applicants must provide one letter of recommendation from a non-relative high school teacher or counselor and a personal written recommendation from a coach, club sponsor, current employer, or community member, who is also not a family member.

The applicant must complete a typed response to all six questions listed below.

**The standard form provided by the high school is not acceptable for the NAACP scholarship.**

Please reference the attached rubric that we use to score your responses.

1. What is/are your life-long personal/educational goals?  
What led you to these goals and how do you plan to reach your goals?
2. Who has been the greatest influence(s) in your life? Describe events that demonstrate how they influenced you.
3. Describe a challenge you have faced and what you learned from it?
4. Describe a situation you were in that showcases your character or leadership skills.
5. Please state any special circumstances which you feel make it important that you have financial aid in the form of our NAACP scholarship.

**Please review the attached rubric to learn how we determine the value of our questions.**

**Application Checklist: Must be included with your application**

1. General Application fully completed
2. Typed responses to five essay questions
3. One letter of recommendation from an unrelated adult who has interacted with you in a meaningful way.
4. Current high school transcript

We are offering assistance with editing the essay portion of this application. Assistance can be arranged by texting Lynne Renick @ 785-550-067



## Lawrence Branch NAACP Scholarship General Application

### Applicant's Personal Information:

Applicant's full legal name: \_\_\_\_\_  
Last First MI

Email: \_\_\_\_\_

High School Attending: Lawrence High \_\_\_\_\_ Lawrence Free State \_\_\_\_\_

Are you African American? \_\_\_\_\_

Applicant Street Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Phone: \_\_\_\_\_  
Cell Landline

### Post-Secondary Institution you plan to attend:

***\*Awards will be sent directly to the student unless they prefer it be sent to the institution.***

\_\_\_\_\_  
School Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State

**One Adult Reference: high school teacher, counselor, coach, pastor or employer**

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Name

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Title/Occupation

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Phone

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Email

**Your signature is required. Your application will be considered INCOMPLETE without it.**

I hereby certify that the information provided in this application is, to the best of my knowledge, true and correct. I have not knowingly withheld any facts or circumstances that could jeopardize consideration of this application.

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Applicant's Signature

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Date

**Deadline: February 12, 2025**