



**ABENY, INC.**

Association of Black Educators of New York, Inc.

Pride • Power • Professionalism

P.O. Box 24984, Cadman Plaza, Brooklyn, NY 11202 (917) 972-3502

Email: [abenyinc@gmail.com](mailto:abenyinc@gmail.com)

Website: [www.abenyinc.wildapricot.org](http://www.abenyinc.wildapricot.org)

Adrian Straker, ABENY Inc. President

### **2024 ABENY SCHOLARSHIP APPLICATION FORM**

Student Name \_\_\_\_\_ Student Phone \_\_\_\_\_

Address \_\_\_\_\_

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

Date of Birth \_\_\_\_\_ Place of birth \_\_\_\_\_

Student's email address \_\_\_\_\_

### **PARENT/GUARDIAN INFORMATION**

\_\_\_\_\_  
Father/Male Guardian Name

\_\_\_\_\_  
Mother/Female Guardian Name

\_\_\_\_\_  
Occupation Father/Male Guardian

\_\_\_\_\_  
Occupation/Female Guardian

\_\_\_\_\_  
Full Address Father/Male Guardian (if different than student's)

\_\_\_\_\_  
Full Address Mother/Female Guardian (if different than student's)

\_\_\_\_\_  
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 \_\_\_\_\_



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### **ACADEMIC PERFORMANCE INFORMATION**

What is your academic average out of 100? \_\_\_\_\_ What is your GPA out of 4.0? \_\_\_\_\_

### **COLLEGE ENTRANCE EXAMINATION INFORMATION (OPTIONAL)**

SAT Evidence Based Reading/Writing Score \_\_\_\_\_ Math Score \_\_\_\_\_

(Be sure to attach an official copy of your scores as indicated below)

### **COLLEGE APPLICATION INFORMATION**

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

\_\_\_\_\_  
Name of College #1

\_\_\_\_\_  
Name of College #2

\_\_\_\_\_  
Name of College #3

\_\_\_\_\_  
City and State of College #1

\_\_\_\_\_  
City and State of College #2

\_\_\_\_\_  
City and State of College #3

### **REMINDER: CHECK TO ENSURE THE FOLLOWING COMPONENTS HAVE BEEN SUBMITTED:**

\_\_\_ 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 student's academic record. It must be signed by a school official and/or contain the school's official seal.

\_\_\_ At least three letters of recommendation. Two of the letters must be from school personnel and one from community representatives.

\_\_\_ An academic 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.

\_\_\_ **Acknowledge Application emailed no later than April 30, 2024. Consideration will only be given to applicants whose entire application package has been received including all items above.**

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

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**RETURN COMPLETED APPLICATION TO** Dr. Sheilah Bobo, Scholarship Chair, at [sheilahbobo@gmail.com](mailto:sheilahbobo@gmail.com). If you have a question, call Dr. Bobo at (917) 412-9099.