



**ORANGES & MAPLEWOOD UNIT**  
P.O. Box 1127, East Orange, NJ 07019 (973) 675-5325  
orangesmaplewoodnaacp@yahoo.com

**APPLICATION**  
**for the**  
**'CORNELIA THOMPSON'**  
**SCHOLARSHIP**  
**\$1,000 Non-renewable Award**

**Students interested in applying for the Cornelia Thompson' Scholarship must meet the following criteria:**

- Must be in the last academic year of their high school pursuits
- Must demonstrate commitment to academic excellence with a documented high school GPA of not less than 2.75 (A = 4.00)
- Must generate documentation that they will attend (within six months) an approved and accredited four year institution of higher education

**How to Apply:**

Applications are available from the Cornelia Thompson Scholarship Committee: Oranges & Maplewood Unit of the NAACP P.O. Box 1127, East Orange, New Jersey 07019

**The application must be received by the NAACP of the Oranges and Maplewood by March 25, 2016**

**Application Package:**

- Cornelia Thompson Application
- A high school transcript from the attending high school attesting to academic standing
- Financial Aid Information (FAFSA) attesting to financial aid need
- Two Letters of recommendations (from non-relatives)
- Candidates must submit an essay (not to exceed 200 hundred words)

**CORNELIA THOMPSON SCHOLARHSIP**

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**FIRST NAME**

**MI**

**LAST NAME**

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**ADDRESS (APT. NO.)**

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**MUNICIPALITY/ STATE/ZIP CODE**

**TELEPHONE NUMBER**

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**Parent/Guardian's Name**

**GENDER:**

**FEMALE** \_\_\_\_\_ **MALE** \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**DATE OF BIRTH**

**E-Mail Address:**

**High School(s) Attended:**

\_\_\_\_\_  
**Name**

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

\_\_\_\_\_/\_\_\_\_\_  
**City/State / Zip Code**

**CAREER ASPIRATIONS:**

**Institution that you will be attending in the fall:** \_\_\_\_\_

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

\_\_\_\_\_  
**City/State/Zip Code**

**COMMUNITY SERVICE ACTIVITIES:**

\_\_\_\_\_  
**Organization**

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

\_\_\_\_\_  
**Contact Individual**

\_\_\_\_\_  
**Organization**

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

\_\_\_\_\_  
**Contact Individual**

\_\_\_\_\_  
**Organization**

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

\_\_\_\_\_  
**Contact Individual**

**Organization**

**Address**

**Contact Individual**

**RECOMMENDATIONS:** The following individuals will be submitting recommendations for me.  
They are:

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Telephone Number**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Telephone Number**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Telephone Number**

**ESSAY: (PLEASE TYPE/NOT MORE THAN 200 WORDS/PLEASE SUBMIT A SEPARATE DOCUMENT)**

**How will your successful goals and aspirations positively impact people of color in our community?**

**OR**

**I believe voting is essential in our democracy because . . . .**