

# 2022 Scholarship Application Sisters Involved In Linking Knowledge

# To be considered for a SIILK scholarship, applicants must meet ALL of the following criteria:

- Must be an African America student, residing in the Southern California area or a teen conference participant or a member of SIILK's virtual community.
- A graduating High School Senior.
- Provide a copy of your college acceptance letter and an official copy of your transcripts (transcripts must be embossed and/or received in a sealed envelope).
- Have a minimum Cumulative Grade Point Average (G.P.A.) of 2.7 or higher.
- Provide three (3) signed letters of recommendation from persons who can attest to the quality of your class work, ability, character and academic proficiency. These letters should be from teachers, guidance counselors, employers, pastor, community organization, or a non-family member.
- Write a personal essay describing your career objectives, leadership abilities, community activities, and why you should be considered for this scholarship. (Maximum of 500 words, typed, double spaced, 12-point font).
- Must have a minimum of 50 hours of community service or leadership initiative.
- Must be available to attend and/or speak at the Teen Leadership Conference 2022

## The following must be completed and postmarked on or before May 18, 2022 Incomplete applications will not be considered.

The completed and signed application form – Pages 2-3, 5
Parent or Guardian signature if you are under 18 years of age
Personal essay (must be typed)
Official copy of transcripts
Three (3) letters of recommendation
4 x 6 picture of yourself (Headshot Only)
Student Activities Form (Attachment A)

Should you have any questions or need additional information, please email the Scholarship Kelly Melton at infoforsiilk@gmail.com

Mail the application on or before May 18, 2022 POSTMARK DEADLINE.

### 2022 Scholarship Application

#### **SECTION A: APPLICANTS INFORMATION**

proof.

Full Name:				
Home Address:	(Last, First, Mi	iddle)		
City:	tate:			
Telephone: ( )	Da	ate of Birth:	//	
Email Address:				
Name and Address of Attending	g High School:			
Counselors/Advisor's Name:		Contact Nur	mber ( )	
Your Cumulative G.P.A	Based On a	(i.e. 4	.0 or 5.0) Maximum scale	
Extracurricular Activities (See Attac	chment)			
Honors or Special Recognition (	See Attachment)			
Approximate number of commur	nity service hours, se	rved within the l	ast 12 months	
Was the service activities part of	of a service/learning	program? Yes	No	
List of all scholarships you hav the amount, and the year	e been awarded. Pl	ease include th	e name of the scholarship,	
Name/Address of accredited in	stitution currently a	ccepted for adm	nissions:	
Auticin stad Field of Otypha	(Address)			
Anticipated Field of Study:				
Do you live with your parent(s) o	r legal guardian(s)?	Yes	No	
f YES: Complete Section B If No: Skip to Section C				
NOTE: If you are an emancipated i	minor or in legal guard	ianship SIILK ma	y require you to provide	

2

#### **SECTION B: PARENT/GUARDIAN INFORMATION**

Marital Status:	Single	_Married	Divorced	Widowed		
Parent/Guardian Combined Annual Income: (Income verification is required)						
Less than \$10,0	00	Ap	proximately \$10,000 to	\$20,000		
Approximately	\$20,000 to \$30,000	Ap	proximately \$30,000 to	\$40,000		
Approximately	\$40,000 to \$50,000	Ap	proximately \$50,000 to	\$60,000		
Approximately	\$60,000 to \$70,000	Ap	proximately \$70,000 to	\$80,000		
More than \$80,	,000					
Parent(s)/Guardian(s	s) Full Name:					
	,		Last, First, Middle)			
Home Address:						
City		State	Zip			
Telephone ( )		E-N	fail Address			
SECTION C: ESSA	YS					
Please use separat	e sheet.					
Essay 1: Describe your career objectives, leadership abilities, community activities, and why you should be considered for this scholarship.						
Applicant:						
Review this form and make certain you have responded accurate to all items.						
I certify that all the statements and information submitted in support of my application is true, complete and accurate to the best of my knowledge and are made in good faith. False information will result in termination of the scholarship if granted.						
Applicant's Signatu	re		Date			
Signature of Parent	or Guardian		Date			

submitting your application.
***************************************
Incomplete or Late Application WILL NOT Be Considered
***************************************
Send Completed Application on or before MAY 18, 2022 – Postmark Deadline:

Please ensure you have completed your application and all items are included before

SIILK
P.O. Box 90772
Los Angeles, CA 90009

### **2022 Scholarship Application**

#### Attachment A - Student Activities

	List Schoo	ol Activities	(Please type or print legibly)	
Name of Organization	Office/Position Held		ffice/Position Held Advisor/Supervisor	
Honors or Speci	ial Recogn	ition (i.e., s	scholastic, literary, athle	tic or others)
Name of Organization/	Group		Award Description	Date Received
	Student (	Community	y Service Information	
Name of Organization		Volunteer Hrs	Advisor/Supervisor	Contact Number