



AULYP **SCHOLARSHIP**

FOUNDERS

The Atlanta Urban League Young Professionals (AULYP) are excited to award 4 scholarships to identify and recognize African-American students in the metropolitan Atlanta area. The scholarship is for students who exhibit academic success and the potential to one day advance the mission of AULYP.

Named to honor the accomplishments of the founding members of AULYP, this scholarship is awarded to 4 African-American high school seniors who will be attending a college or university, and demonstrates outstanding academic achievement, community service, and leadership. The award of \$1000 is to be applied to textbooks, supplies or other educational expenses. *Special consideration will be given to potential candidates who participate in AULYP community service events.*

Eligibility:

High school seniors who will be seeking an undergraduate degree from an accredited college or university in the fall of 2011. Must be a US citizen or permanent resident. Must have a cumulative GPA of 3.0 or better at time of submission (This is based on a 4.0 scale. Students not on a 4.0 scale must have a B average). Applicants must complete and turn in application, essay, 2 recommendations and transcripts by Thursday, June 30, 2011.

Deadline:

Applications must be postmarked no later than Thursday, June 30, 2011. The awards will be presented at the annual Dream Catchers Award reception to be held in August. Scholarship Recipients will be notified of the exact date and time prior to the event. Applications can be mailed to:

Atlanta Urban League Young Professionals
100 Edgewood Avenue NE
Atlanta, Georgia 30303
Attn: Community Service Chairperson



AULYP FOUNDERS SCHOLARSHIP
Application
(Please print or type)

Personal Information

Name: _____
(Last) _____ (First)

Street Address:

City, State, Zip:

Home Telephone:

Parent(s) or Guardian(s) Name:

Home Telephone:

Business Telephone:

Educational Information

School:

City:

State:

*G.P.A.

Scale:

****An official transcript or letter on school stationery from an authorized agent of the school must accompany this application.***

Awards and Achievements:



Description:

(Month/Year)

1.

2.

3.

4.

5.

6.

7.

Awarded:

Extracurricular Activities:

Description:

Time Period: (Month/Year - Month/Year)

1.

2.

3.

4.

5.

6.

7.

8.



9.

10.

Community Service or Volunteer Activities:

Description:

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.



AULYP FOUNDERS SCHOLARSHIP

Application

ESSAY QUESTIONS

Please select one of the following questions and answer it on a separate sheet of paper. Two page limit; one-inch margins (top, bottom, right and left), 12 point font, typed and double-spaced.

1. How will you use your education to improve your community?
2. What is the greatest problem facing the African American community and how do you think it should be solved?

As a condition of acceptance of this award, I, the undersigned, agree that the information provided is correct and factual to the best of my knowledge. I understand that I must be a high school senior at the time of submission. I also understand that to be considered for the award I must submit a fully completed application.

Signature: _____ Date: _____

The completed application must be submitted and postmarked no later than Thursday, June 30, 2011.

Mail to: Atlanta Urban League Young Professionals
100 Edgewood Avenue NE
Atlanta, GA 30303
Attn: Community Service Chairperson

Should you have any questions about the award please email Angie Ross, Community Service Chairperson, at communityservice@aulyp.net

Thank you for applying. Awards will be distributed at the annual Dream Catchers reception to be held in August. Scholarship Recipients will be notified of the exact date and time prior to the event.



AULYP FOUNDERS SCHOLARSHIP RECOMMENDATION FORM

Name:

Title:

School:

Telephone:

Email Address:

Thank you for your assistance in evaluating this applicant who is applying for the AULYP Founders Award that recognizes a high school senior for outstanding academic achievement and leadership. Recommendations must be from Non-related individuals familiar with applicant's achievements and character such as teachers, coaches and community service leaders.

Name of Applicant:

Please write a 1 page letter describing your relationship with the applicant and why you feel the applicant should be awarded the scholarship.

Signature: _____ Date: _____

Print Name: _____



ALL RECOMMENDATIONS SHOULD BE MAILED TO:

**Atlanta Urban League Young Professionals
100 Edgewood Avenue NE
Atlanta, Georgia 30303
Attn: Community Service Chairperson**

Should you have questions or concerns please contact Angie Ross, Community Service Chairperson, at communityservice@aulyp.net. Thank you.

**AULYP FOUNDERS SCHOLARSHIP
RECOMMENDATION FORM**

Name:

Title:

School:

Telephone:

Email Address:

Thank you for your assistance in evaluating this applicant who is applying for the AULYP Founders Award that recognizes a high school senior for outstanding academic achievement and leadership. Recommendations must be from Non-related individuals familiar with applicant's achievements and character such as teachers, coaches and community service leaders.



Name of Applicant:

Please write a 1 page letter describing your relationship with the applicant and why you feel the applicant should be awarded the scholarship.

Signature: _____ Date: _____

Print Name: _____

ALL RECOMMENDATIONS SHOULD BE MAILED TO:
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Should you have questions or concerns please contact Angie Ross, Community Service Chairperson, at communityservice@aulyp.com. Thank you.