



National Hook-Up of Black Women, Inc.
Volusia County Chapter

**HIGH SCHOOL SENIOR SCHOLARSHIP
APPLICATION**

Applicant's Personal Information:

Name _____

Address _____ **City** _____

State & Zip _____ **Phone No** _____

Email _____

High School Currently Attending _____

College/University you will attend _____

College Major _____

Please list your favorite school activity and why it is your favorite.

Application Deadline March 31 Each Year.

STATEMENT OF ACCURACY

I hereby affirm that all of the stated information provided by me is true and correct to the best of my knowledge. I understand that it is my responsibility to submit all required documentation by March 31 each year.

Printed Name of Applicant _____

Signature _____ **Date** _____