

ABENY, INC.  
ASSOCIATION OF BLACK EDUCATORS OF NEW YORK

**ABENY SCHOLARSHIP INFORMATION**

On Saturday, June 19, 2010, the Association of Black Educators of New York will sponsor its Thirty-Fifth Annual Scholarship and Awards Luncheon at Antun's located in Queens Village, New York. ABENY will award scholarships to seniors from the New York City public high schools. Among the scholarships offered is a \$4,000 Elaine A. Davis Scholarship.

To apply for an ABENY scholarship, the graduating senior must submit the following material to the Scholarship Committee at the address designated at the end of this letter:

**The application for a scholarship requires the following:**

1. The completion of both sides of the enclosed scholarship application form.
2. The submission of 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.
3. An official copy of the candidate's academic record and his/her latest SAT scores. It must be signed by a school official and/or contain the school's official seal.
4. At least four letters of recommendation. Two of the letters must be from school personnel and two from community representatives.
5. A resumé which includes extra-curricular activities, community service and school service. (Please include an e-mail address).
6. A black and white or color photograph, which will be included in our journal if the applicant is a scholarship winner. Passport size is preferred.
7. All applications should be mailed in a 9x 12 inch envelope (with adequate postage), and postmarked no later than April 30, 2010.
8. ABENY awards several scholarships. At least one will be awarded to a student who plans to enter the teaching profession. However, please note that students of all majors will be considered.

If you have questions, or would like to receive an application, please call Dr. Sheilah Bobo, Scholarship Chair, at (917) 412-9099.

**Applications should be sent to:**

Dr. Sheilah Bobo  
Chair, ABENY Scholarship Committee  
454 East New York Avenue  
Brooklyn, NY 11225

**ABENY SCHOLARSHIP APPLICATION**  
**(Please print with black ink)**

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

Address \_\_\_\_\_

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

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

Sex (Circle One) M / F

**Parents/Guardian**

\_\_\_\_\_  
**Father/Male Guardian**

\_\_\_\_\_  
**Mother/Female Guardian**

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

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

\_\_\_\_\_  
**Address Father/Male Guardian**

\_\_\_\_\_  
**Address Mother/Female Guardian**

\_\_\_\_\_  
**City State Zip**

\_\_\_\_\_  
**City State Zip**

\_\_\_\_\_  
**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** \_\_\_\_\_

**TEST INFORMATION**

Have you taken the SAT? (Circle One) yes/No Verbal score \_\_\_\_\_ Math \_\_\_\_\_

Have you taken the ACT? (Circle One) Yes/No Score \_\_\_\_\_

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

\_\_\_\_\_  
Name of College

\_\_\_\_\_  
Name of College

\_\_\_\_\_  
Name of College

\_\_\_\_\_  
City and State

\_\_\_\_\_  
City and State

\_\_\_\_\_  
City and State

**EXTRACURRICULAR ACTIVITIES** in which you are presently active (use additional pages if needed).

School Activities: \_\_\_\_\_

Community Activities: \_\_\_\_\_

Offices Held and Honors Received: \_\_\_\_\_

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

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

Consideration will be given only to candidates submitting a complete application package which includes items enumerated in the attached ABENY letter.

**RETURN APPLICATION TO:**

Dr. Sheilah Bobo  
Chairperson, ABENY Scholarship Committee  
454 East New York Avenue  
Brooklyn, NY 11225  
Cell: (917) 412-9099

**DEADLINE DATE: APPLICATION MUST BE POSTMARKED NO LATER THAN APRIL 30, 2010**