



## ILLINOIS LEGISLATIVE BLACK CAUCUS FOUNDATION

### 2018 - Undergraduate Scholarship Application

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#### Scholarship Eligibility:

This application is for students seeking an **undergraduate degree**. Each applicant should be an accepted student at an accredited institution of higher learning such as a community college, private institution or certified vocational training program.

ILBC Members, ILBC employees, ILBC Foundation board members, and their immediate relatives are ineligible for the scholarship program.

#### How to Apply:

You can email the Illinois Legislative Black Caucus Foundation Scholarship Selection Committee at [info@ilbcf.org](mailto:info@ilbcf.org) to request an application.

#### All applicants must:

- Be an Illinois resident
- Complete the ILBCF **Undergraduate Scholarship Application**
- Submit verification of college enrollment or letter of acceptance
- Write a personal statement (500 words or less) describing interest and involvement in community and public service, hobbies, talents, sports and/or school activities. The statement should address future academic and professional career plans and may highlight any personal challenge(s) overcome
- Submit high school transcript (if in college, current transcript)
- Submit two letters of recommendation from persons other than relatives
- Submit a recent photograph of himself/herself
- Provide proof of voter registration if 18 years of age or older
- Forward the application and **all** supporting materials to the ILBCF Scholarship Selection Committee by **May 8th, 2018 (No Exceptions)**
- **Any supporting material not submitted along with application will result in applicant being disqualified.**

**Application Deadline:** All applications for the scholarship must be postmarked by **May 8th, 2018. Please take note that only applicants chosen to receive an award will be notified by letter.**

#### **Submit Applications to:**

Illinois Legislative Black Caucus Scholarship Foundation Selection Committee

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## 2018 - Undergraduate Scholarship Application

P.O. Box 10243, Springfield, IL 62791

Please print and complete form in detail filling in all appropriate blanks, be as specific as possible.

Current State Senator \_\_\_\_\_

Current State Representative \_\_\_\_\_

### PERSONAL DATA:

Full Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Permanent Street Address \_\_\_\_\_

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

Telephone Number \_\_\_\_\_ Emergency Number \_\_\_\_\_

Date of Birth (Month/Day/Year) \_\_\_\_\_ Place of Birth \_\_\_\_\_ Age \_\_\_\_\_

Email Address \_\_\_\_\_

Father's Name (if applicable) \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's Name (if applicable) \_\_\_\_\_ Occupation \_\_\_\_\_

*Please tell us how you learned about the ILBC Scholarship* \_\_\_\_\_

### EDUCATION:

\_\_\_\_\_  
Name of High School Address \_\_\_\_\_ Did you graduate? \_\_\_ Yes \_\_\_ No

\_\_\_\_\_  
Name of College Address \_\_\_\_\_ \_\_\_ Fresh \_\_\_ Soph \_\_\_ Jr \_\_\_ Sr

\_\_\_\_\_  
Vocational/Trade Address \_\_\_\_\_ Status? \_\_\_\_\_

\_\_\_\_\_  
Official Classification (circle one) Pre-Apprentice Apprentice Other \_\_\_\_\_

2. List the school you will attend or are attending: \_\_\_\_\_

School \_\_\_\_\_ Location \_\_\_\_\_

(Applicant must submit proof of admission to an accredited college, university, or trade.)

3. List your area of study \_\_\_\_\_

4. Personal Statement (Separate Sheet 500 words or less) describing interest and involvement in community and public service.

### CERTIFICATION:

I hereby certify that all information in this application is true and accurate.

\_\_\_\_\_  
Applicant Name (print) Date

\_\_\_\_\_  
Applicant Signature Date