



United Belizeans of Northern Illinois

# 2017 Scholarship Application

“The roots of education are  
bitter but the fruit is sweet”

Aristotle

## Mission

We are dedicated to promoting and enhancing opportunities for Belizean Americans by raising awareness through advocacy, education and service. We strive to enrich cultural identity, bring unity and empower families in our community.

## ELIGIBILITY REQUIREMENTS

### **Students are eligible to be considered for \$800.00 UBNI Scholarship if they:**

- Are of Belizean Descent
- 24 years of age or younger
- Are residents of Illinois
- Enrolled in at least 6 credit hours at a 2 year community college/4 Year University or Accredited Trade School.
- Have a cumulative grade point average of 3.0 or higher on a 4.0 scale
- Demonstrate leadership abilities through community service, Extracurricular, or other activities.
- Have completed and submitted all required forms
- All finalists must be present for an interview with members of the UBNI Scholarship committee board.
- Must attend UBNI Gala on August 12th to receive Award
- Application Deadline is May 18th, 2017
- Scholarship is non-renewable

## ELIGIBILITY REQUIREMENTS

**Scholarship Application:** All sections of this application must be completed. The students must sign and date the last page of this application. Application Deadline is May 18, 2017 @ midnight. No applications will be accepted after that date.

**Essay:** Must be 500 words typed, double space, Times New Roman, size 12. Please choose one topic

1. *What does this years theme mean to you "the roots of education.....fruit is sweet"*
2. *Why is cultural identity important to you?*

**Transcripts:** Submit most recent official High School or college transcript with GPA

**Letter Of Recommendation:** The student must submit (1) letter of recommendation

**Release of Consent Form**

**Acceptance Letter from College or University**

**Electronic Passport Size Photograph**

Mail Applications to:  
UBNI P.O Box 1036 Waukegan IL 60079  
or email to [ubni.org@gmail.com](mailto:ubni.org@gmail.com)



## PERSONAL INFORMATION

First Name

Middle Name

Last Name

Address

City

State

Zip

Telephone

Email Address:

Place of Birth:

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Nationality:

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Parent(s) or Guardian with whom you live:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

## Consent of Release Form

Photo/Video Release

I, \_\_\_\_\_ give my consent to \_\_\_\_\_ to  
( name of parent/guardian if applicant is minor ) ( name of applicant )

be videotaped, photograph, audio taped, and/or interviewed for "United Belizeans of Northern Illinois", for the purposes of publicity, advertising, or media coverage related to the activities of the "United Belizeans of Northern Illinois" scholarship program. I understand that social media's will be utilized to promote the mission of UBNI.

## Academic Background

Name of High School Attended \_\_\_\_\_

City

State

Zip

Expected Graduation Date: \_\_\_\_\_ Class Rank: \_\_\_\_\_ out of \_\_\_\_\_

Grade Point Average (on 4.0 scale): \_\_\_\_\_ ACT/SAT Score: \_\_\_\_\_

College/ University or Trade School you will be attending in the fall of 2017:

Name: \_\_\_\_\_

City

State

Zip

Circle one:  2-year Institution  4-year Institution  Trade School

Major

Career Goals

Signature of Applicant

Date