



Thomas County Branch NAACP

Sadie Gibson Scholarship Application

Section 1: Personal Information

Last Name:	First Name:	M.I. :
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Mailing Address:	City:	State/Zip:
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Physical Address (If different):	City	State/Zip
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DOB:	Age:	Telephone Number: ()	Email Address:
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Mother's Name and Occupation:	Father's Name and Occupation:
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Section 2: Education

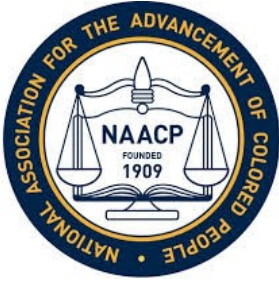
Name of Your High School:	Current Grade Point Average:
School Counselor's Name:	Counselor's Signature (For G.P.A. verification)

Are you interested in attending a four-year institution of Higher Education?

List Possibilities _____

What is your intended area of study or major(s) ? _____

Please attach a brief narrative about yourself, future aspirations, and how this scholarship will benefit you.



Sadie Gibson Scholarship Application
Continued

Section 3: Extracurricular Activities

Please list your religious, school, and community activities:

Section 4: References

Name:	Address:	Telephone Number: () -
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Name:	Address:	Telephone Number: () -
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Name:	Address:	Telephone Number: () -
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Section 5: *For Scholarship Committee Official Use*****

Scholarship Committee Comments: _____

Committee Member Signatures:

Scholarship Approved:	Scholarship Disapproved:
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Date: _____