Dear Applicant:

Through the continued efforts of concerned members of the Kansas City area African American community and the University of Missouri-Kansas City, UMKC again will offer privately financed scholarships to area African American students for the 2016-2017 academic year.

Both the community and the university are concerned that many promising African American students leave the Kansas City area to attend colleges and universities elsewhere and do not return to enrich this community with their knowledge and abilities. We hope that an increase in scholarship support at UMKC for capable African American students will help address this problem.

The UMKC Herman Johnson African-American Scholarship Fund has been offering scholarships since Fall 1987, and during the 2015-2016 academic school year is assisting 23 students (new and renewed awards) with scholarships. The UMKC Herman Johnson African American Scholarship Committee will continue to work towards increasing the endowment to provide more scholarships in the future.

We invite you to apply for scholarship assistance if you meet the eligibility criteria included in this application packet. The application deadline is February 1, 2016. ALL MATERIALS MUST BE POSTMARKED OR RECEIVED BY THE UMKC FINANCIAL AID & SCHOLARSHIPS OFFICE NO LATER THAN THAT DATE.

Scholarship recipients will be notified by mail. All applications become the property of the UMKC Herman Johnson African-American Scholarship Fund. Information provided on the application form is confidential and for use by the UMKC Herman Johnson African-American Scholarship Selection Committee only. If you have any questions, please contact the UMKC Financial Aid and Scholarships office, (816) 235-1154.

Sincerely,

The Committee for the Herman Johnson African-American Scholarship Fund
PURPOSE

The Herman Johnson African-American Scholarship Fund for students at the University of Missouri–Kansas City was established to assist area African American students in their efforts to achieve a college education at UMKC.

ELIGIBILITY

All applicants MUST fulfill the following eligibility criteria:

1. You MUST be a graduate of an accredited high school in the nine-county area.
2. You MUST be a current resident of Johnson, Leavenworth, Miami, or Wyandotte County in Kansas; or Cass, Clay, Jackson, Platte, or Ray County in Missouri.
3. You MUST have maintained a non-weighted 3.0 cumulative GPA on a 4.0 scale in high school. (Other GPA scales will be converted to its equivalent on a 4.0 scale.) If currently enrolled in college, you must have a 2.5 cumulative GPA in ALL college work.
4. Scholarships are available to support baccalaureate-level study only. Students who are planning to study or are currently enrolled in any baccalaureate program offered at UMKC are eligible. You must be able to document that you have a minimum of 24 credit hours to complete towards your bachelor’s degree. In addition, students in years 1-3 of the combined BA/MD or Pharmacy Doctoral programs, and those who have not yet completed the 90 undergraduate hours required for the BA/JD program are eligible to receive the scholarship for the undergraduate portion of their study only.

SELECTION CRITERIA

The following criteria will be used in the selection process:

1. Grade point average, course content, and standardized test scores
2. School and community activities
3. Evidence of leadership and character
4. Evaluation of essay (at least one page in length)
5. Results of an interview with scholarship committee members for finalists

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED BY THE SELECTION COMMITTEE.
AWARD RENEWAL REQUIREMENTS

1. Scholarship recipients must ENROLL IN AND EARN a minimum of 12 credit hours in both the fall and winter semesters.
2. Scholarship recipients must maintain a cumulative GPA of 2.5 or higher.
3. Renewal reviews are conducted annually. Scholarships will be automatically renewed if the above criteria are met.
4. Recipients are expected to represent the Herman Johnson Scholarship Fund at special events as requested

INSTRUCTIONS FOR APPLYING

1. Complete the attached UMKC Herman Johnson African-American Scholarship Application form, front and back, answering all questions. The application form must be legible and in dark enough type to be duplicated on a copy machine.
2. Provide a typewritten essay, at least one page in length on “Why I Should Receive the Herman Johnson African-American Scholarship.”
3. Provide an official high school or college transcript, separate from the ones sent to the Office of Admissions.
4. Provide the name and address of the person that you have asked to write a letter of recommendation for you. We suggest that you give your reference person a stamped envelope addressed to the Financial Aid and Scholarships Office (see address below). The person that you select should be a teacher or counselor that can evaluate you in the following areas: academic growth potential, leadership skills/potential, motivation, personal initiative, and time management skills.
5. Provide a typewritten list of awards, honors, and scholarships that you have received at any level. (one page only please)

APPLICATION MATERIALS MUST BE POSTMARKED NO LATER THAN FEBRUARY 1, 2015

ALL APPLICATION MATERIALS MUST BE SENT TO:

UMKC HERMAN JOHNSON AFRICAN-AMERICAN SCHOLARSHIP FUND
FINANCIAL AID AND SCHOLARSHIPS OFFICE
101 ADMINISTRATIVE CENTER
5100 ROCKHILL RD
KANSAS CITY, MO  64110

QUESTIONS ? CALL (816) 235-1154 or (800) 775-8652

Those with speech or hearing impairments may use Relay Missouri: 1-800-735-2966 (TT) or 1-800-735-2466 (Voice)
UMKC HERMAN JOHNSON AFRICAN-AMERICAN SCHOLARSHIP APPLICATION
APPLICATION DEADLINE: FEBRUARY 1, 2016

DATE: ___________________                                               E-mail________________________

NAME____________________________________________UMKC SID# ___________________

STREET______________________________________PHONE___________________________

CITY_________________________________STATE_______________ZIP CODE____________

HIGH SCHOOL________________________GPA_________________ACT_________________

COLLEGE (1)________________________DATES ATTENDED_______________GPA___________

COLLEGE (2)_____________________DATES ATTENDED_______________GPA___________

ACADEMIC UNIT TO WHICH YOU ARE APPLYING OR HAVE BEEN ADMITTED:
(check only one)

____College of Arts and Sciences: Major:______________

____Conservatory of Music

____Medicine (6yr, BA/MD)

____School of Biological Sciences

____Dentistry (6yr, BA/DDS)

____Nursing

____Business/Accounting

____Education

____Pharmacy

____Computer Science/

Telecommunications

____Coordinated Undergraduate Engineering Program

HAVE YOU APPLIED FOR ADMISSION TO UMKC? ____YES ____NO

HAVE YOU BEEN ADMITTED TO UMKC? ____YES ____NO

ARE YOU CURRENTLY ENROLLED AT UMKC? ____YES ____NO

NOTE: YOU MUST APPLY FOR ADMISSION TO UMKC TO BE CONSIDERED FOR THIS AWARD.

How do you plan to finance your college education?

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________
PLEASE LIST ALL MAJOR SCHOOL ACTIVITIES THAT YOU HAVE ACTIVELY PARTICIPATED IN: (PLEASE INDICATE ANY OFFICE HELD)

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<th>ACTIVITY</th>
<th>OFFICE HELD</th>
<th>DATES (From-To)</th>
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PLEASE LIST ALL MAJOR COMMUNITY ACTIVITIES THAT YOU HAVE ACTIVELY PARTICIPATED IN: (PLEASE INDICATE ANY OFFICES HELD)

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<th>ACTIVITY</th>
<th>OFFICE HELD</th>
<th>DATES (From-To)</th>
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</table>
PLEASE LIST ALL WORK EXPERIENCE, INCLUDING HOURS PER WEEK WORKED DURING SCHOOL. PLEASE INCLUDE ANY VOLUNTEER WORK OR WORK DONE FOR PARENTS. (May include helping in a business or doing major work in the home)

<table>
<thead>
<tr>
<th>EMPLOYER</th>
<th>HOURS WORKED PER WEEK</th>
<th>DATES (From-To)</th>
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PLEASE LIST ON A SEPARATE SHEET OF PAPER ANY SPECIAL RECOGNITIONS, AWARDS AND/OR HONORS AND SCHOLARSHIPS YOU MAY HAVE RECEIVED AT THE SCHOOL, CITY, COUNTY, STATE OR NATIONAL LEVEL. (One page only please)

PLEASE LIST THE NAME AND ADDRESS OF THE PERSON THAT YOU HAVE ASKED TO WRITE A LETTER OF RECOMMENDATION FOR YOU:

NAME: ___________________ POSITION: ___________________
ADDRESS: ____________________________________________

I give permission for the Financial Aid and Scholarships Office at the University of Missouri-Kansas City to release my official transcript to outside parties who are considering me for scholarship opportunities.

Name ___________________ Date ___________________

APPLICATION DEADLINE: FEBRUARY 1, 2016