



Northeastern University

The John D. O'Bryant African-American Institute

Northeastern University Black Alumni Scholarship Fund Application

Personal & Academic Information

First Name : _____

Last Name : _____

E-mail Address : _____@_____

Local Address : _____

Home Address : _____

Phone Number : _____

NU ID Number : _____

Select your College

- | | |
|------------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Business Administration | <input type="checkbox"/> Arts, Media and Design |
| <input type="checkbox"/> Computer and Information Sciences | <input type="checkbox"/> Engineering |
| <input type="checkbox"/> Bouve Health Sciences | <input type="checkbox"/> Science |
| <input type="checkbox"/> Social Sciences and Humanities | <input type="checkbox"/> Undeclared |

Major : _____ Graduation Year : _____

Cumulative GPA : _____



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List Academic Honors and Awards

Leadership Roles and Activities

Co-Curricular Activities (within major):

Community Activities:

Co-op Experiences:

Student Org. Membership and Leadership Role(s):

Other Information (i.e. experiences, community awards, etc.)



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Essay Question

Essay Question: The Northeastern University Black Alumni Scholarship is specially selecting the students of color that represent the best and the brightest Northeastern has to offer. Please briefly describe your life goals and how you might represent the best and brightest Northeastern has to offer. Include in your essay examples of good citizenship, community service and anything that defines you as a leader. (max of 1000 words):



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Essay Question (continued)



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Essay Question (continued)



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WAIVER FOR RELEASE OF INFORMATION

(Pursuant to the Family Educational Rights and Privacy Act)

I hereby provide the staff members in the Office of Student Conduct & Conflict Resolution with authorization to release, discuss and/or share information regarding my student disciplinary record(s) with the following organization:

The Northeastern University Black Alumni Scholarship Committee (administered through the John D. O'Bryant African-American Institute)

I understand that my signature below indicates that I am waiving my right to confidentiality of my disciplinary records with regard to the specific people or organizations identified/named above *Northeastern University Black Alumni Scholarship Committee (administered through the John D. O'Bryant African-American Institute)*.

Student First and Last Name (printed)

Student Signature

Date

Please note:

YOU MUST attach a photocopy of your NUID or State license to this completed form.



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After fully completing your application please return by fax to:

The Northeastern University Black Alumni Scholarship Fund
C/O The John D. O'Bryant African-American Institute
NORTHEASTERN UNIVERSITY
Boston, Massachusetts 02115

Fax: (866) 617-7616