



POSITIVE BLACK MALE ASSOCIATION OF HOUSTON

Empowering youth, building strong minds, bodies & spirits
Strengthening the classroom in this city, state & nation
Impacting achievement & promoting success in youth ages 6-18

PBMA Under-Graduate Scholarship Application

Application due date: April 26, 2025
Scholarship 2025

1. DEADLINE for scholarship applications is *April 26, 2025 (NO EXCEPTIONS)*
2. Refer to application process below for a list of the supporting documents needed (i.e., reference forms, evidence of GPA, etc.) Incomplete applications will not be considered.
3. If any question does not apply to you in this application please put N/A in the space.
4. Type or print legibly. Illegible applications will be returned to you.
5. You will be notified by phone or mail in April regarding the status of your application.
6. If you have any questions about the application, contact us by email at positiveblackmale@pbmah.org

PURPOSE PBMA scholarship was established in 2008. The mission of the scholarship is to provide financial assistance to individuals enrolled for undergraduate study in community colleges, and universities. The Scholarship principally targets two and four year academic programs.

FINANCIAL ASSISTANCE *is based on academic performance, leadership potential, and participation in community volunteer hours.*

SCHOLARSHIP AWARDS

PBMA/LOGP award scholarships on the basis of a comprehensive process. Areas that are reviewed by the committee include, but are not limited to the following: *Academic Accomplishments, Community Service, and Personal Essay. Scholarship funds are paid directly to the college or university.*

CRITERIA

- *Applicants must be a current registered member of PBMA/LOGP.*
- *Applicants must have permanent residence status in Texas, and must be a permanent resident of the United States.*
- *Applicants must be completing or have completed high school successfully with a minimum GPA of 2.0 on a 4.0 scale.*
- *Applicants must be accepted as a full time student at a college, university, or trade school program for the upcoming academic semester.*
- *Applicants must complete and submit a Scholarship Application by, **April 26, 2025***

TIMELINE

- Applications are due **April 26, 2025**
- Applicants are notified if awarded a scholarship by July 25, 2025

Application Process

SCHOLARSHIP APPLICANTS MUST PROVIDE:

- Completed application form.
- Official high school transcript in a sealed envelope from the institution.
- Two letters of recommendation.
- Proof of acceptance at an academic, vocational or technical school for post-secondary studies.
- A letter of acceptance from the college or university or proof of enrollment

SCHOLARSHIP AWARDS

Award notification will be given by May 03, 2025. For the Fall 2025 Semester

Deadline for the application is **April 26, 2025**. Applications postmarked after this date will not be considered.

Please mail OR submit application to:

PBMAH
Scholarship Program
PO BOX 38388
HOUSTON, TX 77238
Or email to
positiveblackmale@pbmah.org

Applicant must fill out applications.

Please type or print your answers below. A separate sheet may be used if needed. If application is illegible it will be returned to you.	
1	Last Name: _____ First Name: _____
2	Mailing Address:: Street: _____ City: _____ State: _____ ZIP: _____
3	Daytime Telephone Number: () Email address: _____
4	Current High School: _____ High School Graduation date: _____
5	I will be attending the following school in the <u>Fall</u> _____ <u>of 2025</u> : Address/ Phone _____
6	What year will you enter school? Freshman Sophomore Junior Senior
7	Will you be a full time student? _____ (minimum 12 hrs.)
8	Will you be a commuting student? Will you live on campus? _____ If you are not living on campus, where will you be living? _____
9	Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA; your most recent official school transcript required.

10	ACT Score: _____ Or SAT Score: _____ A copy of your ACT or SAT score sheet on official high school transcript is required.
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11	Name & address of parent(s) or legal guardian(s): Use reverse side of application if you need more space. Name (s) _____ Street: _____ City: _____ State: _____ ZIP: _____ Home phone of parents or legal guardians: _____				
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12	List the name of any college you have attended.	Year Began	Year Ended	Year Graduated	Type of Degree or grade received /Hours
	A.				
	B.				
	C.				

13	What specialty/major do you plan to major in as you continue your education?
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14	List other financial assistance you will receive per semester or quarter:
	A.
	B.
	C.

15	SCHOOL EXTRA-CURRICULAR ACTIVITIES: Please list school extra-curricular activities in which you have participated. Note leadership roles and dates.
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16	PBMA/LOGP: Do you have any PBMA/LOGP affiliations? Yes / No If yes, What program are you affiliated?
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17	ORGANIZATIONS: Please list community organizations such as service, volunteer and religious organizations in which you are now active or have previously been active. Note leadership roles and dates.	
18	RECOGNITIONS: Please list important awards and recognitions received. Note organizations presenting honor and date.	
19	GOALS: What are the short and long term goals for your life?	
20	NEED: Please explain your need for the Shining Stars of Faith Scholarship	
21	<p>A. The following criteria must be met in order for the application to qualify to be reviewed by the scholarship committee.</p> <p>B. Your application will be returned to you if these items are not attached to this application. (No exceptions.)</p> <p>C. Circle "YES" or "NO" to be sure you have completed and attached each item as required.</p>	
	YES	NO Application complete
	YES	NO Two reference forms. Your references should be in separate sealed envelopes
	YES	NO Proof of college acceptance or current student enrollment. A letter of college enrollment or program enrollment is required for receipt of funds.
	YES	NO Most recent <u>official</u> high school or <u>official</u> college transcript. Photocopies of your transcript are <u>not acceptable</u> .
	YES	NO 500 word essay on "What Leadership Means to me".
	YES	NO Photo (Head Shot)

STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me to the Positive Black Male Association of Houston Scholarship Committee is true, correct and without forgery. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the "Positive Black Male Association of Houston" Scholarship Program.

I hereby understand that if chosen as a scholarship winner, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before scholarship funds can be awarded.

Signature of scholarship applicant: _____ Date: _____

**The deadline for this application must be
postmarked by April 26, 2025 No
exceptions!**