



# Napoleon Harris Foundation

## Napoleon Harris Scholarship Fund Criteria

1. Applicant must be a senior in High School.
2. Applicant must be already accepted into Northwestern University.
3. Applicant must have a minimum cumulative G.P.A. of 3.5 or Higher
4. Applicant must have an ACT score of 18 or above (or SAT overall score of 1700 or above)
5. Applicant class ranking has to be in the 50<sup>th</sup> percentile or higher
6. Applicant must provide three letters of recommendations: all recommendations must be sealed with signatures on seal with contact information included.
7. Applicant must submit a 3-5 page paper indicating the importance of this scholarship, and what this scholarship means to you.

\*All papers must be in 12pfont, Times New Roman, typed and double spaced.  
Applicant must complete all documentations in a document receptacle.  
Please do not submit any incomplete packets, they will not be considered.



# Napoleon Harris Foundation

Napoleon Harris Scholarship Fund Application

## **Release Statement-Signature Required**

I approve the release by my High School of my name, address, social security number, and academic record for the purpose of The Napoleon Harris Scholarship. I certify that, to the best of my knowledge all statements submitted re my own and are true. I understand that this application and all records gathered for my application file are confidential and will not be disclosed. Access will be controlled by appropriate personnel. All signatures are required in order for this application to be considered complete.

Principal Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Guidance Counselor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_



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## **Napoleon Harris Scholarship Fund Application**

Applicant Name \_\_\_\_\_ SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

County \_\_\_\_\_ Phone(\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_ Age \_\_\_\_\_ Sex: Male/Female \_\_\_\_\_

In order to be considered a candidate for the scholarship, you must provide three letters of recommendation: Please list the names and contact telephone numbers of the individuals who have sent letters of reference for you.

1. \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_
2. \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_
3. \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Name of University \_\_\_\_\_

Honors or Awards:

Activities: (Include High School or Community Service Only)

Your career and educational goals: