

## National Association of Buffalo Soldiers and Troopers Motorcycle Clubs (NABSTMC)

Maryland (Mother) Chapter

(BSMC-MD)

## 2018 William C. Price Memorial Scholarship

### The philosophy of the BSMC-MD is to:

- Promote the history of African American Veterans.
- Be a positive role model for youth in our Community.
- Support our veterans by visiting local Veterans, their families, and supporting our fallen Hero's.
- Support Charitable Organizations in our Community.
- Uphold the traditions and standards of the National Association of Buffalo Soldiers and Troopers Motorcycle Club. (NABSTMC)
- Promote Motorcycle Safety in our Community.

**Annually, Buffalo Soldiers Motorcycle Club, Maryland Chapter provides financial assistance** to students from the State of Maryland or the District of Columbia that best represents the attributes of the Buffalo Soldiers assigned to the 9<sup>th</sup> and 10<sup>th</sup> Cavalry Regiment. The scholarship winner will be awarded a one-time \$2,000 academic scholarship for use at an accredited U.S. college of their choice. **Since inception in 2002, the BSMC-MD, has awarded \$19,000 in academic scholarships.** 

**The William C. Price Scholarship** contest is open to African-American seniors attending high schools in the state of Maryland or the District of Columbia. Applicants must be U.S. citizens or permanent residents, carrying a minimum 2.50 GPA at the end of their junior year. Applications must be postmarked or emailed by April 1, 2018. Mail completed applications to: T. Williams, 12809 Classic Springs Dr Manassas, VA 20112. The email address is <u>twilliams1906@hotmail.com</u> Semi-finalists will be selected and notified by April 30, 2018.

Application forms are available online at www. <u>http://buffalosoldiers-maryland.net/faq/</u>. Once on the website, an applicant should first select the Community Service icon, then select William C. Price Memorial Scholarship and select click to open to view Scholarship Application icon. For more information, email T. Williams at <u>twilliams1906@hotmail.com</u>.

#### **Instructions for candidates:**

- (1) Complete all forms in its entirety. Attach additional pages if required.
- (2) Prepare a letter of introduction; who you are, your accomplishments to date, family background, and the degree to which you are seeking, and financial need. Provide a brief summary on how you plan to use the scholarship if selected.
- (3) Provide at least one professional letter of recommendation prepared on official letterhead.
- (4) Provide Student's name, the complete name and address of the school you will be attending and student ID number. Checks will be mailed to the school via the student's account.
- (5) Write a 500 word essay (typewritten or handwritten in your own words) on one of the following topics. Do not write about the Buffalo Soldiers or Troopers Motorcycle Club, but about the historical Buffalo Soldiers formed in 1866:
  - A. In what ways does the Buffalo Soldier legacy inspire you and why is it necessary to pass this legacy on to future generations?
  - B. Buffalo Soldiers exemplify many positive character traits. Please provide examples of at least two traits and briefly describe how they can help mold or shape your life in the future.

C. The Congressional Medal of Honor is presented to the recipient by the President of the United States in the name of Congress. This is the highest award for valor presented to military members for exemplifying the highest degrees of bravery and self-sacrifice on the battlefield. Please provide a brief narrative regarding a Buffalo Soldier that received this honor and what can be learned from his life, efforts and commitment to duty.

D. What are your career aspirations upon graduation from college?

(6). Applications must be postmarked or emailed by April 1, 2018. Mail completed applications to: T. Williams, 12809 Classic Springs Dr Manassas, VA 20112. The email address is <u>twilliams1906@hotmail.com</u>.

# NABSTMC, Maryland (Mother) Chapter 2018 William C. Price Memorial Scholarship

## **Application Deadline: April 1, 2018**

#### **Contact Information:**

First Name:	Last Name:	
Address:		
City:	State:	
Zip Code:	Email:	
Home Phone:	Cell Phone:	
Date of Birth:	Gender:	

## Academic Information:

High School Name:		City / State	
Graduation Date:		GPA:	
Class Rank:		Class Size:	
ACT Composite		SAT Critical	
Score:		<b>Reading Score:</b>	
SAT Math Score:		SAT Written	
		Score:	
Does Your school off	er Honors, AP, or IB P	rograms, Dual	
Enrollment? Yes / No	0		
Number of Honors	Number of AP	Number of IB	Number of Dual Enrollment
<b>Classes You Have</b>	<b>Class You Have</b>	<b>Classes You</b>	Class You Have
Taken:	Taken:	Have Taken:	Taken:

### **Financial Need:**

Use this space to describe your financial situation and why this scholarship is necessary to help fund your College education:

**College Information** (If you have not finalized your college choice, provide your first choice school.):

College Name:		City / State:	
Institution Type:			
Certificate Four	-Year Two-Year Vocati	onal or Technical:	
Degree Sought: As	ssociates Bachelors	Certificate	
Major:			
Anticipated			
Graduation Date:			

## **Applicant Service, Extracurricular Activities and Work Experience:**

Use this space to provide the applicant's volunteer service, extracurricular activities and work experience during the applicant's academic career. **Do not attach a resume in lieu of completing this form. It will not be reviewed.** 

Description		
Total Hours or Average Hours per week:	Are you still participating? (yes / no)	
Start Date:	End Date :	
Highest Position Held:		

Description		
Total Hours or Average	Are you still	
Hours per week:	participating? (yes / no)	
Start Date:	End Date :	
Highest Position Held:		

Description		
<b>Total Hours or Average</b>	Are you still	
Hours per week:	participating? (yes / no)	
Start Date:	End Date :	
Highest Position Held:		

### **Honors and Awards:**

Use this space to provide the applicant's honors and awards during the applicant's academic career. **Do not** attach a resume in lieu of completing this form. It will not be reviewed.

Description		
Level	Academic Year	
(National/State/Regional/Etc.):	Achieved	

Description		
Level	Academic Year	
(National/State/Regional/Etc.):	Achieved	

Description		
Level	Academic Year	
(National/State/Regional/Etc.):	Achieved	

Description		
Level	Academic Year	
(National/State/Regional/Etc.):	Achieved	

Description		
Level	Academic Year	
(National/State/Regional/Etc.):	Achieved	

Name of local Buffalo Soldier Chapter: \_\_\_\_\_

#### **Supporting Documents:**

The following documents are required to complete your application:

- ACT/SAT Scores
- Official High School Transcript (or equivalent if home schooled)
- A 500 word essay on the topics described above
- At least one letter of recommendation on official letter head from a teacher, guidance counselor or school administrator, and/or community service organization
- A letter of acceptance to an institution of higher learning
- Statement explaining your financial need, with a phone number
- Parent's signature below if student is under 18 years old

## **Terms & Conditions:**

I, \_\_\_\_\_\_, certify, to the best of my knowledge, the information on this application is complete and accurate. Falsification of any information will cause my disqualification from the scholarship competition.

I understand:

(1) It is my responsibility to make sure the application process is complete by the required deadline. If not, the application may be disqualified from the scholarship competition and may not be considered for an award.

(2) This application, upon receipt, becomes the property of the program sponsor.

I agree that, if selected as an award winner for the National Association of Buffalo Soldiers and Troopers Motorcycle Club Scholarship Program, the program sponsor or its agents may use my name and likeness and any other information or materials provided in connection with this program for purposes of news, publicity and advertising in all media, including but not limited to print and electronic media, press releases, internet websites and video media.

To comply with the provisions of the Family Educational and Privacy Act of 1974, I hereby grant permission for school officials to release secondary school records and other requested information, if necessary.

If you are under 18, your parent or guardian must also agree to these Terms and Conditions.

Applicant Signature:		<b>Date:</b>	
Parent Signature: (if app	plicable)		

\*\* If the completed packet is given to a local chapter, local chapter must acknowledge receipt before sending to Frontier Scholarship Representative.

Chapter\_\_\_\_\_Signature\_\_\_\_\_