

Mat-Su Martin Luther King, Jr. Foundation
P.O. Box 875754 • Wasilla, AK 99687

October 18, 2019



**2019 MAT-SU MLK, Jr. FOUNDATION
SCHOLARSHIP ANNOUNCEMENT**

Executive Board:

Aundra O. Jackson
President, Palmer

Bernice Fugere
*Vice President,
Wasilla*

Daphne Barbosa
*Secretary/Treasurer,
Palmer*

Board Members

Shuvonne Benton
Palmer

Simon Brown, II
Wasilla

Cheryl Puryear
Palmer

Melvin L. Sage-EL, II
Wasilla

Bertha Rouser Scott
Anchorage

Casey Steinau
Big Lake

The 2019/20 MAT-SU MLK, Jr. Foundation Scholarship submissions are now open to Mat-Su Valley graduating high school seniors. This is a one-time non-renewable scholarship to the deserving graduate in the amounts of \$3500.00 to three (3) students (\$2000.00, \$1000.00, \$500.00). All applicant submissions must submit the application to the above P.O. Box or email to matsumlkjr@gmail.com, with the subject line "**MLK JR Scholarship**". The documents must be in PDF format for online submission. Applicants must submit the required information by the submission deadline of **March 31, 2020**.

Please note that applications and all components become the property of the Mat-Su MLK Jr. Foundation. The Mat-Su MLK Jr. Foundation will notify the scholarship winner no later than **May 5, 2020**. If you require additional information, contact Ms. Cheryl Puryear (907) 354-5702 or Mr. Aundra O. Jackson at (907) 227- 9799.

My best to your endeavors.

Sincerely,

Aundra O. Jackson,
President, Mat-Su MLK, Jr. Foundation

2020 MAT-SU MLK JR. SCHOLARSHIP FOUNDATION APPLICATION

(PLEASE PRINT LEGIBLY)

Legal name in full _____
(Print/Type) Last Name First Name M.I.

Current home address _____
Number, Street, and Apartment Number

City State ZIP

Email address _____

Home phone _____ Cell phone (optional) _____

Parent(s) Guardian(s) Full name _____

How is Mat-Su residence established?

Home address for school registration (If different from above)

Family's primary residence

Other: _____

Mat-Su High School currently attending _____

Graduation Date: _____ Major _____

Name(s) and Addresses of Institution(s) to which you have applied:

1) _____
Name of Institution

City State ZIP

2) _____
Name of Institution

City State ZIP

3) _____
Name of Institution

City State ZIP

Tell us something about yourself.

- 1. What are the three most significant courses you have taken in preparation for your college journey?**
- 2. What do you hope to do and what position do you hope to obtain upon completing your graduate studies?**
- 3. Who or what influenced your career choice (Law, medical, technology, biology, Community services)?**
- 4. What additional personal information do you wish to share with the Mat-Su Martin Luther King Jr. Scholarship Foundation?**

Note: This application must be completed in full, with the following documents attached:

- A statement (*in your words*) of not less than 150 words on one of Dr. King's goals: Ethnic and Racial Equality, Love, Non-violence or Poverty
- Proposed expenses for the college/university to which you have applied
- Description of extracurricular and community service activities, see the attached Volunteer Worksheet (For community service activities please provide organization, contact name and phone number)
- Two (2) signed letters of recommendation, excluding relatives; Example: (Teachers, employer, religious, or civil leader)
- High School Transcript with current photograph (Note: Transcripts must be received by this organization in a sealed envelope and have the school seal. The attached photo may be displayed at the Yearly Martin Luther King Jr. Annual Events)

I certify that all the statements made in this application form are true, complete and correct to the best of my knowledge and belief and are made in good faith. I also agree to reimburse any funds should I default according to this scholarship requirement. I further understand that the application and all components become the property of the Mat-Su MLK Jr. Foundation.

Print Name _____

Signature

Date

**Deadline for receipt of all information is
31 March 2020**

Community Service/Volunteer Timesheet

**Volunteer's
Name**

**Volunteer
Position/Role**

Volunteer Supervisor's Name and contact phone number

Date	Number of Hours	Cumulative hours	Supervisor's initials

Date	Number of Hours	Cumulative hours	Supervisor's initials

PROPOSED EXPENSES

College

Tuition \$ _____

Fees \$ _____

Room and Board

• On-campus \$ _____ (This includes rent for dorm or campus apartment + meals)

or

• Off-campus \$ _____ (This will include deposits, rent, and all utilities to include internet and cell phones, transportation, as well as entertainment, personal care and food)

Itemize here:

	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

(a) Total College and Room and Board \$ _____

Resources available for college (i.e., scholarships, grants, parents, other gift, employment)

	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

(b) Total Resources available \$ _____

