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*California Association
of Black Social Workers
Community
Scholarship Application*

2019-2020

The California Association of Black Social Workers (CABS) is awarding community scholarships grants to students planning to attend college or in an undergraduate program. Each applicant must submit this application and supplemental material in completion. **All materials must be postmarked no later than, Friday, October 4th, 2019 NO EXCEPTIONS WILL BE MADE.** The following criteria will be used to select the scholarship awardees:

- GPA- minimum of 2.75;
- A typed-written Personal Profile (1 page);
- Statement of financial need; (1 page);
- Two (2) References (preferably one from a teacher and one from a local community organization or personal reference) 1 page each;
- Timely and complete application;
- Full time student (8 units or more) entering/existing student.

The scholarship is designated for African American high school and undergraduate students interested in pursuing degrees in the area of social work, sociology, or criminal justice.

CABS is an African American group of social workers throughout the state of California committed to advocating for communities regarding social issues and concerns that affect our communities.

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Chairperson, CABS Education
Committee

Loretta Swanegan, 619-846-7366
President, CABS

Mail all CABS 2019 Application
to

**San Diego Association of Black
Social Workers Post Office Box
740823 San Diego, CA 92114**

**Must be postmarked by
October 4th, 2019**

College/University of Interest: 1. _____
2 _____
3 _____

Personal Profile:

Please attach to application: This is your space to tell us about yourself. The profile should be a one page, double spaced type written statement which should include, but not be limited to the following:

*Applicant's future goals

*Public Service and community activities (for example, homeless services, environmental protection, conservation, advocacy activities, work with religious organizations)

*Any other information you would like considered

*Provide information regarding scholarships, publications or special recognitions you have received

*Family composition (everyone in your household)

Additional Comments:

Applicant Signature

Date

Authorization To Release Information

Applicant: Please complete PART A of this form and submit to the high school or college/university that you are currently attending. The institution must complete PART B and include the requested information:

- **current enrollment status**
- **Current GPA**

Part A: To be completed by Applicant

I hereby authorize _____
Name of Institution

Address of Institution

To release to a representative of the CA Association of Black Social Workers information regarding my current enrollment status and current grade point average for the purpose of verification in a scholarship application process.

Name (print): _____
(Last) (First) (Middle)

Birth Date: _____ Birth Place _____
(City and State)

Applicant Signature Date

Part B: To be completed by the high school or college/university Grade Point Average _____

Place Institution Stamp/Seal Here

The above information is true and accurate to date:

Authorization Signature: _____

Date: _____