

Sharon Rosita Barber Scholarship Application

The Shenandoah Valley Black Heritage Project was established in 2013 to learn, share, and illuminate the rich African American history and culture of the Shenandoah Valley.

The Sharon Rosita Barber Scholarship was founded in the honor of the Shenandoah Valley Black Heritage Project founding member Sharon Rosita Barber. The Sharon Rosita Barber Scholarship is an award to a deserving high school graduating senior intending to pursue a course of study at a two-year or four-year educational institution. This one-time scholarship of \$1700.00, is funded to increase educational opportunities for one African American student.

Eligibility for applicants

- Applicant must be a resident of the Shenandoah Valley.
- As of February 15, 2025, applicant must be a full-time high school senior or a part-time or full-time college student.
- Applicant must attend a public, private or at-home institution or educational program.
- Applicant must have at least a 2.0 grade point average (or a "C" average).
- Applicant must demonstrate community involvement, improvement in academics and/or desires to attend college.
- Applicants must not be related to any member of the SVBHP Executive or Advisory Board or staff of SVBHP, for this presents a conflict of interest.

How to apply

- 1. Download the application and print a hard copy to write on.
- 2. Complete the Sharon Rosita Barber Scholarship Application with all portions filled in.
- 3. Please answer the short answer questions. Limit to 150 words.
- 4. Include one letter of recommendation from a teacher, coach, and/or mentor.
- 5. Email a photo copy of the completed application to admin@valleyblackheritage.org or mail it to the address below by the deadline of **February 15, 2025**. Applications postmarked after this date will not be considered.
- 6. Scholarship applicants will be notified by **May 15, 2025**.

Shenandoah Valley Black Heritage Project 425 Hill Street Harrisonburg, VA 22802 admin@valleyblackheritage.org

APPLICANT INFORMATION						
First Name:		Last Name:				
Preferred Name:	Age:			Date of	Birth:	
Home Address:						
City:	State:			Zip:		
Email:		Phone:				
School:			Yea	Year:		
Graduation Date:		GPA:				
Country of Birth:			Race/Ethnicity:			
SAT Score (if applicable):		ACT Sco	Γ Score (if applicable):			
I will be attending the following in the Spri	ing 2025/I	Fall 2025:				
Area(s) of specific academic interest:						
Gross Family Annual Income:						
PARENTS(S) OR LEGAL GUARDIAN	(S)					
Please complete if you are under 18.	(5)					
Name(s):						
Address:						
11441900						
City:	S	tate:			Zip:	
Email:	P	hone:				

INVOLVEMENT
List academic achievements, hobbies, outside interests, extracurricular activities, and volunteer activities.
SHORT ANSWER
How has a being part of church, school, or community organization challenged a personal belief or idea?

SHORT ANSWER	
Describe something you are passionate about.	
SHORT ANSWER	
Explain how your view on education has changed over your acade	mic career?
Explain now your view on education has enamed over your deduce	mic curcor.
SHORT ANSWER	
How will this scholarship help you reach your goals?	
SIGNATURE	
The information contained in this application is correct to the best	t of my knowledge and all questions
were answered honestly.	
G:	Date
Signature:	Date:

Letter of Recommendation

Signature: _		 	p-
Contact:	* 1 - 7 * 1 - 1	 	 _