

NKEMNJI ACHENJANG FOUNDATION  
NAF Scholarship-Financial Assistance Program  
Application Form  
[www.nkemnjiachenjang.org](http://www.nkemnjiachenjang.org)  
[nafincorporated@gmail.com](mailto:nafincorporated@gmail.com)



**Applicant Information**

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last/Family Name \_\_\_\_\_  
Gender Female Male Date of Birth (MM/DD/YYYY) \_\_\_\_\_  
School or Personal Email Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_

Permanent/Home Address	School Mailing Address
Street _____	Street _____
City _____	City _____
State/Province _____ Zip Code _____	State/Province _____ Zip Code _____
Country _____	Country _____

**Academic Information**

Academic Level Secondary/High School College/University Graduate-level  
Name of School \_\_\_\_\_  
Financial Aid Office Phone Number \_\_\_\_\_  
Financial Aid Office Email Address \_\_\_\_\_  
Program of Study or Major \_\_\_\_\_  
Date Enrolled \_\_\_\_\_ Current GPA \_\_\_\_\_ Expected Graduation Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Please list the names of the individuals who will email letters of recommendation to NAF:  
1) \_\_\_\_\_ 2) \_\_\_\_\_

**Assistance Information**

Would you be willing to submit a short video about yourself? Yes No  
Have you previously applied for NAF assistance? Yes No  
Do you have any dependents? Yes No  
If yes, how many dependents? \_\_\_\_\_ Age(s) of dependents \_\_\_\_\_

How did you hear about the NAF Scholarship-Financial Assistance Program?

- Friend
- Faculty
- Parent
- NAF Representative
- Online
- Other: please specify \_\_\_\_\_

### Application Materials

Applicant Email Attachments	Letters of Recommendation
<input type="checkbox"/> Completed application	Recommenders should email support/recommendation letters to NAF at: <a href="mailto:nafincorporated@gmail.com">nafincorporated@gmail.com</a> .
<input type="checkbox"/> Essay	
<input type="checkbox"/> Latest school transcript(s)	
<input type="checkbox"/> Resume or curriculum vitae	

### Certification & Permission to Release Information

I have read and understood the provisions of the NAF Scholarship-Financial Assistance Program, and I certify that all submitted documents are complete and accurate. I understand that any false, misleading, or inaccurate statements are bases for ineligibility. If I receive an award based on such statements or information, I understand that the award may be revoked. I understand that NAF may request additional information to decide on my application, including a personal interview. I agree that if this application is accepted and I receive an award, I will be bound by the terms and conditions of the award and will participate in NAF's promotion. By signing this application, I authorize NAF to confirm, release, and use the information included in this application and my supporting materials. Awardees are expected to participate in public relations to promote the foundation's charitable activities. If selected to receive aid, I agree to submit the following items prior to funds being dispersed:

- Required: Your photo – may be in front of your school building or with a school official
- Required: A short statement (no more than six sentences) of appreciation for the award
- Required: A quote (no more than three sentences) about how the award will help you achieve your academic/professional aspirations and goals
- Encouraged: A short video (no more than 2 minutes) about how NAF has made an impact on your education and life

(View past submissions on our [Facebook](#) and [LinkedIn](#)).

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Email your completed application and supporting materials to:**

[nafincorporated@gmail.com](mailto:nafincorporated@gmail.com) by April 15, 2024