



**DELAWARE AFRO-AMERICAN SPORTS HALL OF FAME, INC.**  
**Post Office Box 1140**  
**301 Pennewill Drive**  
**New Castle, Delaware 19720**

September 3, 2018

Dear Counselor and Graduating Seniors:

The Delaware Afro American Sports Hall of Fame, Inc., has six \$1000 scholarships (two per county) to award to graduating seniors for this year who will be attending an accredited College/University in the fall of 2019. Selections will be based on the student's academic achievement, financial need, three letters of recommendation, and a biographical sketch. They must have participated in high school sports program for a minimum of two years.

Completed applications should be returned by March 8, 2019 to:

Ned Brown, Jr., Scholarship Chair  
548 Sandy Hill Trail  
Camden, DE 19934

If you have any questions please do not hesitate to call; 302-593-6203 or e-mail me;  
NedBrown01@comcast.net.

Sincerely,

Ned Brown, Jr.  
Scholarship Chair

<b>Charles J. Laws</b> President	<b>Michael Brown</b> Vice-President	<b>Wendy Hanner</b> Recording Secretary	<b>John Oates, Jr.</b> Treasurer	<b>Hollis Smack</b> Chaplain	<b>Clemon Jordan</b> Parliamentarian
<b>Bernard Pinkett</b> Contact Person	<b>Howard Smack</b> Assistant Treasurer	<b>Debra J. Allen</b> Corresponding Secretary			



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**SCHOLARSHIP APPLICATION**

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip

Telephone No \_\_\_\_\_ Birth Date \_\_\_\_\_ Grad Date \_\_\_\_\_

High School Attended \_\_\_\_\_

High School Counselor's Name \_\_\_\_\_

List any honors or prizes received in high school on back of application

Name of College or University \_\_\_\_\_ Anticipated entrance \_\_\_\_\_

Major \_\_\_\_\_

Parents (or guardians) \_\_\_\_\_

Home Address

Indicate sisters, brothers or dependents in your household (use back or another sheet of paper)

The following must accompany this application:

Letter of acceptance/Latest transcript/SAT scores/Three written recommendations and a biographical sketch including any unusual family circumstances or information which you feel is vital in helping us make a decision.

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

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Do not write below this line

Date received: \_\_\_\_\_ Application fully completed yes no

- |  |  |  |                                     |                                 |   |
|--|--|--|-------------------------------------|---------------------------------|---|
| <b>Charles J. Laws</b><br>President      | <b>Michael Brown</b><br>Vice-President     | <b>Wendy Hanner</b><br>Recording Secretary       | <b>John Oates, Jr.</b><br>Treasurer | <b>Hollis Smack</b><br>Chaplain | <b>Clemon Jordan</b><br>Parliamentarian |
| <b>Bernard Pinkett</b><br>Contact Person | <b>Howard Smack</b><br>Assistant Treasurer | <b>Debra J. Allen</b><br>Corresponding Secretary |                                     |                                 |   |