



THE ATLANTA JAMAICAN ASSOCIATION, Inc.
P. O. Box 2207, Lithonia, GA 30058
<https://www.atlantajamaicanassociation.org>

April 1, 2024

Dear Sir/Madam:

We are requesting your assistance in distributing the enclosed information inviting students to apply for scholarships which are offered by The Atlanta Jamaican Association, Inc. (AJA).

AJA is a non-profit organization that was founded in 1977 to promote friendship, unity, and understanding between the peoples of Jamaica and the United States. As part of this effort, a scholarship program was established to assist college-bound high school students of Jamaican ancestry in their educational pursuits.

Only students with financial needs will be considered. Candidates are required to submit an application including a one page response on an assigned topic, as well as a Curriculum Vita (Resume) to qualify for the scholarship. Subsequently, members of the AJA Education Committee will conduct a virtual interview with students who were shortlisted per their application and CV on **Saturday, May 25, 2024**. Involvement in school and community activities and academic ability will be additional factors in the selection of the recipients. The committee will notify successful candidates by the end of May 2024. The formal presentation will take place at the Annual Jamaica Independence Ball (virtual) in Atlanta on **Saturday, August 10, 2024**.

The attached application form and agreement, transcript, and Curriculum Vitae should be emailed no later than **April 30, 2024** to the following address:

AJA Education Committee ed@atlantajamaicanassociation.org

Thanks for your support in this endeavor.

Sincerely,

AJA Education Committee
Email: ed@atlantajamaicanassociation.org



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THE ATLANTA JAMAICAN ASSOCIATION, Inc.
SCHOLARSHIP APPLICATION FORM

Name _____

Address _____

City _____ State _____ Zip Code _____ Phone _____

Email address _____ Birthplace _____ Age _____

Mother's Name _____ Mother's Birthplace _____

Father's Name _____ Father's Birthplace _____

High School _____ University/College _____

Date of Admission _____ Planned Course of Study _____

Additional information:

Write at least one paragraph outlining your financial NEEDS and how you plan to apply this scholarship if awarded. Use additional page if necessary.

Office held or special responsibilities:

Scholarships, distinctions and /or honors:



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Community activities:

Personal and career goals:

Extra –curricular Activities:

Please check which of the following applies to you:

1. Full Scholarship _____
2. Full Financial Aid _____
3. Partial Scholarship _____
4. No Scholarship _____
5. No Financial Aid _____



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**THE ATLANTA JAMAICAN ASSOCIATION, Inc. SCHOLARSHIP AWARD
General Information for Applicants**

ELIGIBILITY REQUIREMENTS

Applicants must satisfy all requirements below:

- (1) An “incoming first year student” AND be Jamaican OR of Jamaican parentage
 - **At least one parent/guardian must be of Jamaican heritage.**
 - **Jamaican first year students can either be accepted to attend college or university in Jamaica or in the USA on a visa.**
- (2) Hold a minimum of 3.5 Grade Point Average or equivalent.
- (3) Provide proof of college acceptance.
- (4) Each scholarship applicant must **submit** the following **by the deadline**:
 - a. **completed Application Form**
 - b. **signed Agreement**
 - c. **copy of Transcript**
 - d. **curriculum vitae by the deadline.**

DEADLINE All materials should be returned to the Scholarship Committee, **no later than April 30, 2024.**

Scholarship Committee

AJA Education Committee ed@atlantajamaicanassociation.org



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THE ATLANTA JAMAICAN ASSOCIATION, Inc. AWARD AGREEMENT

In applying for this scholarship, I agree to abide by the rules, regulations, practices, and policies of The Atlanta Jamaican Association, Inc. that govern this award. I also agree to serve as a Youth Ambassador for the AJA for a minimum of 1 year. In this capacity, I will help the AJA further their cause by including young people and helping with social media outreach.

- **I further agree to accept the decision of the judges as final.**
- **I agree that all funds received from the Association will be used for educational purposes.**
- **I authorize The Atlanta Jamaican Association, Inc. to verify any or all of the information supplied with this application.**

Your signature also gives us permission to use your name, photographs, and/or application in any AJA's media or materials without compensation. AJA may use applicant materials to advertise and promote the Scholarship Program and to raise additional funds.

Print Name _____

Signature _____ Date _____

Students should not apply unless they meet the requirements listed. All information supplied will be treated as strictly confidential and will be used solely for this scholarship. All material provided about this award will become the property of The Atlanta Jamaican Association, Inc. The Association reserves the right to publish or dispose of such material in the manner it chooses. The Atlanta Jamaican Association, Inc. reserves the right to revise the rules for the scholarship if the Association finds it necessary.