ASSOCIATION of BALTIMORE CITY



ABC

PSR

PUBLIC SCHOOL RETIREES, Inc.

ABCPSR, Inc. Scholarship Application 2025

Name:	_	
Home/Permanent Address	Zip code:	
Home Phone number:		
Local Address:		
Birthdate:		
School/College Name:	H.S. Graduation Date:	
Address:		
City, State, Zip code:		
Intended Major:		
Intended College- 1 st choice:		
2 nd choice:		
School Record **Official Transcript/s must be included		
High School GPA: Majo	or:	
Offices held/participation on organization or teams:		
Participation in organizations outside of school:		

Family informat	tion - Name:				
Family Member	<u>Ye</u>	early Income	<u>Employ</u>	er's Name and Address	
List of brothers/si	isters living in the	home who are	attending school/c	ollege	
	onsible for your ca		applied. Received	<u>Amount</u>	 List
Work experience (l	Paid and/or Volunted	er- list most rec	ent first)		
Dates	Employer's N	ame	Hours per	Paid(P)	
<u>From-To</u>	<u>& Address</u>		Wk. Worked	Volunteer (V)	
ESSAY					

On a separate sheet, write an essay of 350-500 words, typewritten, double spaced, explaining your career goal, how attaining your goals will help you give something back to the community; and why you should be a recipient of this scholarship. *** Make sure to include your name on the essay.

ADD ADDITIONAL SHEET/S OF PAPER, IF NECESSARY

DUE DATE: April 08, 2025

MAIL TO: Kathleen Cain, Scholarship Chairperson

3806 Woodbine Avenue Baltimore, Maryland 21207