**CARIBBEAN**

**STUDENTS’**

**SCHOLARSHIP**

**FUND**, I**NC.**

**(CSSF)**



***Offering scholarships to promising high school seniors and/or returning***

***undergraduate students of Caribbean heritage***

***2025***

Website: cssfinc.org

***Dear Scholarship Fund Applicant:***

On behalf of the CSSF, Inc. Board of Directors, we applaud your efforts to pursue a college education. Your interest in applying for this scholarship shows that you have decided to positively affect your future through higher education. We are committed to providing opportunities for students like you.

Keep in mind that most scholarship programs, including ours, are competitive processes. To ensure that your application receives full consideration, we suggest that you:

1. Carefully read the eligibility requirements.
2. Follow the application instructions.
3. Have a colleague proofread your work.
4. Applicant is held responsible for all information submitted in the application.

We realize how important this process is to you and your family, thus we take great care in reviewing all applications. We wish you much luck and success!

**SCHOLARSHIP PURPOSE**

The Caribbean Students’ Scholarship Fund, Inc. provides an opportunity to invest in the education of our community’s youths. Simultaneously, the CSSF, Inc. will establish and maintain a fellowship rooted in traditional and historical Caribbean principles--of using one’s skills in service to the community and put into practice those principles that build upon the strong history of the Caribbean.

**ELIGIBILITY**

To be considered, the applicant must meet ***ALL***of the following criteria:

* Must be of Caribbean descent.
* Be a current high school senior or high school graduate possessing a General Equivalency Diploma.
* Planning to enroll or currently enrolled as a full-time student in an accredited two- or four-year institution of higher learning for the 2025 – 2026 academic year.
* Legally resides in the Washington D.C. Metropolitan area (Maryland, Northern Virginia or the District of Columbia).
* Possess a minimum cumulative grade point average of 2.5 on a 4.0 scale.
* Must be able to demonstrate financialneed. Provide a dated copy of the previous year 1040 tax form.
* Must not be a previous recipient**.**

**ADDITIONAL SCHOLARSHIPS AVAILABLE**

* West Indian American Military Members Association Scholarship (WIAMMA)
* Dr. Keith and Berna Warner Scholarship

**APPLICATION PROCESS**

All current Scholarship recipients are required to perform at least two (2) community service events sponsored by the CSSF, Inc. that are deemed necessary by the membership. The Scholarship candidate(s) from the previous year should return, get acquainted and share some experiences with the newly selected candidates. The prior Scholarship recipient(s) must be prepared to make aformal introduction of the new candidates**.**

Eligible students should apply by sending the completed application form along with an essay and sealed high school transcript to the Caribbean Students’ Scholarship Fund, Inc.

**For consideration, all applications must be postmarked by February 28, 2025.**

**Mailing Address: Caribbean Students’ Scholarship Fund, Inc., 2125 Countryside Drive, S. S., MD 20905**

**SELECTION AND NOTIFICATION**

Based on the above criteria, scholarship recipients will be selected by the Caribbean Students’ Scholarship Fund, Inc. Advisory Board members. Applicants will be notified in writing by **March 14, 2025**. **Candidates must be available for a Zoom interview with the CSSF Advisory Board members on April 5, 2025.**

**CARIBBEAN STUDENTS’ SCHOLARSHIP FUND, INC. APPLICATION**

Have you previously applied for a CSSF Award?  Yes  No

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| LAST NAME | FIRST | MI | APPLICATION DATE | |
| DATE OF BIRTH | AGE |  | SOCIAL SECURITY NO. |
| ADDRESS WHILE AT SCHOOL |  | CITY | STATE ZIPCODE |
| PARENT’S/HOME ADDRESS |  | CITY | STATE ZIPCODE |
| HOME PHONE | APPLICANT’S CELL PHONE |  | PRIMARY EMAIL ADDRESS |
| **ACADEMIC INFORMATION**  FALL 2025 CLASS LEVEL:  COMMUNITY COLLEGE:  1st year  2nd year  FOUR YEAR COLLEGE:  Freshman  Sophomore  Junior  Senior  5th year Senior  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  INSTITUTION NAME WHERE YOU WILL BE ENROLLED IN FALL 2025 (Do not abbreviate name)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  INSTITUTION ADDRESS CITY STATE ZIPCODE  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  INSTITUTION NAME, IF TRANSFERRING DURING WINTER/SPRING TERM OF 2025–2026 ACADEMIC YEAR  (Do not abbreviate name)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TRANSFER ADDRESS CITY STATE ZIPCODE  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  DATE OF TRANSFER  **FAMILY INFORMATION**  NET INCOME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Please provide proof) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_INDICATE CARIBBEAN LINEAGE MOTHER’S BIRTHPLACE FATHER’S BIRTHPLACE NUMBER OF DEPENDENTS CURRENTLY IN COLLEGE (INCLUDING YOURSELF) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  YOUR MARITAL STATUS:  Single  Married  Separated  Divorced  Widowed | | | | |

**STUDENT ACTIVITIES**

Using the same headings below, please provide information on your experiences for each area on a separate

sheet; be as specific as possible regarding dates and the length and depth of your activities. (If not completed,

application will be disqualified). Also, please attach your resume/profile to this application.

• Work Experience • Community Activities • Honors and Awards Received • Career Goals

Please attach the following to this application:

1) Under CONFIDENTIAL cover, provide two (2)written references from people who have known you for at least three (3) years and are not related to you.

1. Write an essay in no less than 500 words on one of the following topics.

* How do you feel connected to your Caribbean ancestry? Explain and describe your activities.
* What gives you a sense of pride and satisfaction in your daily activities.
* What would be your argument for or against climate change or global warming. Describe your actions.
* Describe and explain your ultimate dream job to affect social change.

Please be able to adequately discuss your topic.

**APPLICATION CERTIFICATION AND RELEASE OF INFORMATION:**

* I certify that all information on this application is true and complete to the best of my knowledge.
* I certify that I meet all eligibility requirements as specified in this application and the accompanying instructions.
* I understand that application materials become the property of CSSF, Inc. and will not be returned.
* I hereby authorize CSSF to share or publish my GPA, application, and photos/videos for the purpose ofevaluation, recruitment, public relations, possible employment, or any other related activity.
* I understand that I must notify CSSF of any changes in my enrollment status. I also understand that a change in full-time status may result in the cancellation of any award.

**CHECK LIST**

Please check each of the following required documents before submitting your application:

* Completed and signed application.
* Essay (not less than 500 words).
* High school transcript/GPA Certification Form (this may also be forwarded directly from your current school).
* Two (2) written references (under confidential cover).
* A complete, signed and dated copy of your most recent financial information (i.e. Income Tax Form 1040 and one of either a Student Aid Report or FAFSA application).

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APPLICANT’S SIGNATURE DATE

CSSF applications are available at cssfinc1@cssfinc.org. For consideration, all applications must be postmarked by **Feb. 28, 2025**. Mailing Address: **Caribbean Student’s Scholarship Fund Inc., 2125 Countryside Drive, Silver Spring, MD 20905**