



Napoleon Harris Foundation

Napoleon Harris Scholarship Fund Criteria

1. Applicant must be a senior attending Thornton Township High School in Harvey, IL
2. Applicant must be already accepted into a University or College
3. Applicant must have a minimum cumulative G.P.A. of 3.5 or Higher
4. Applicant must have an ACT score of 18 or above (or SAT overall score of 1700 or above)
5. Applicant class ranking has to be in the 50th percentile or higher
6. Applicant must provide three letters of recommendations: all recommendations must be sealed with signatures on seal with contact information included.
7. Applicant must submit a 3-5 page paper indicating the importance of this scholarship, and what this scholarship means to you.

*All papers must be in 12pfont, Times New Roman, typed and double spaced.
Applicant must complete all documentations in a document receptacle.
Please do not submit any incomplete packets, they will not be considered.



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Napoleon Harris Scholarship Fund Application

Release Statement-Signature Required

I approve the release by my High School of my name, address, social security number, and academic record for the purpose of The Napoleon Harris Scholarship. I certify that, to the best of my knowledge all statements submitted re my own and are true. I understand that this application and all records gathered for my application file are confidential and will not be disclosed. Access will be controlled by appropriate personnel. All signatures are required in order for this application to be considered complete.

Principal Signature: _____

Date: _____

Guidance Counselor Signature: _____

Date: _____

Parent Signature: _____

Date: _____

Student Signature: _____

Date: _____



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Applicant Name _____ SSN _____ - _____ - _____

Address _____ City _____ State _____

County _____ Phone(_____) _____ - _____

Email _____ Age _____ Sex: Male/Female _____

In order to be considered a candidate for the scholarship, you must provide three letters of recommendation: Please list the names and contact telephone numbers of the individuals who have sent letters of reference for you.

1. _____ (_____) _____
2. _____ (_____) _____
3. _____ (_____) _____

Name of University _____

Honors or Awards:

Activities: (Include High School or Community Service Only)

Your career and educational goals: