

National Association of Historically Black Colleges and Universities Title III Administrators, Inc. www.hbcut3a.org

Statement of Accuracy

I hereby affirm that all the above stated information p	provided by me is true and correct to the best of my
knowledge. I also consent that my picture may be used for any purpose deemed necessary to promote this	
scholarship program.	
Signature of scholarship applicant:	
Date:	
l,	, certify that I have reviewed the application packet
(Please Type or Print)	
and all items are complete to the best of my knowled	lge.

Signature of Title III Administrator (Project Director):

Date:_____

REMEMBER

The deadline for the application to be received is **Tuesday, September 3, 2019.**

QUESTIONS?

Email us at nabcut3ascholarship@gmail.com.