



## CIGNA SCHOLARSHIP APPLICATION - 2024-2025 ACADEMIC YEAR

Dear Applicant:

The vision of the Urban League of Metropolitan St. Louis, Inc. is that African Americans and others in the St. Louis region will have the opportunity to create economically self-sufficient lives in communities that are flourishing with opportunity and growth. Our Educational Quality and Equality strategy is ensuring that all our children are well-educated and prepared for economic self-reliance in the 21<sup>st</sup> century.

The Urban League offers the Cigna Scholarship. You need only to complete the attached application to be considered for the scholarships. Scholarship awards will be made in accordance with the respective eligibility requirements of each scholarship and the availability of funds.

It is very important that you thoroughly review this application and answer fully each item that pertains to you. It is equally important that you submit with the completed application all required supporting documents. Official transcripts may be submitted separately. However, official transcripts must be **received** by the due date. **Incomplete applications will not be considered.**

### **ELIGIBILITY REQUIREMENTS**

- High School senior.
- Attends a high school in the St. Louis Metropolitan area.
- Current and Cumulative High School Grade Point Average of 2.7 or above.
- Applicants must be a resident of the St. Louis Metropolitan Area.
- Applicants must be a 2024 High School Graduate.
- Applicant must **not** be an immediate family member of an Urban League of Metropolitan St. Louis employee or an immediate family member of an Urban League Board of Directors member.
- Other conditions and stipulations may apply. The Urban League reserves the right to withdraw an awarded scholarship. All awards are subject to funding availability and other unforeseen factors.



Two scholarships will be awarded each year.

Cigna will sponsor an annual award to college bound high school graduates.

- Two \$1000 awards will be granted, one each for a male and a female graduate.
- Scholarship recipients will be selected by ULSTL and must meet the following requirements:
  - Must be a 2024 graduate from a St. Louis Metropolitan area high school.
  - Must submit a maximum 500 word essay stating college aspirations.
  - Must submit a letter of recommendation from a teacher, counselor, or community service organization (on official letterhead).
  - Minimum GPA 2.7 (verified via transcript).
  - Must provide proof of acceptance to a college or university.
  - Must provide proof of enrollment at a college or university (verified via class schedule).
  - Must provide a balance due statement from the financial-aid office. Scholarship will be paid directly to the college or university.

**Application Deadline: Thursday, April 4<sup>th</sup>, 2024, by 5:00 P.M.**

**All materials, including supporting documents, must be received by the due date!**

The Urban League of Metropolitan St. Louis is not responsible for lost or misdirected mail.

Mail or deliver completed  
applications to: **Urban League of  
Metropolitan St. Louis Attn:  
Scholarship Committee**  
**1408 N. Kingshighway St. Louis, MO 63114**



## GENERAL INSTRUCTIONS

Please read the instructions carefully. Failure to follow the instructions may result in the disqualification of your application.

1. You must type or print legibly in ink.
2. Complete all items required.
3. If necessary, you may use additional sheets of plain, white paper.
4. Label each additional sheet with your full name.
5. Label each additional sheet with the item or items to which you are responding.
6. Include an official transcript with the application, unless the transcript is mailed to the Urban League by your school, college, or university. The transcript must be received by the Urban League by the due date.
7. Include your resume.
8. Include at least one letter of acceptance from an accredited four-year college or university with your application.
9. Include with the application one letter of recommendation from a teacher, counselor or community service organization (on official letterhead).
10. Include one (1) **wallet-size** black and white or color photograph of yourself. The photo must be a head shot. Do not submit prom pictures or glamour shots. Photos will not be returned.
11. Include a 500-word essay titled, "Stating your college aspirations." Essay must be typed, double-spaced, and must include your name in the upper left corner of each page.

**Before submitting the application, tear off and discard the general requirements/general instructions page. Place the photo in the upper right-hand corner of the personal information page. Assemble the application in this order: Photo/personal information page, application, supporting documents. Secure the photo, application and supporting document with a binder clip.**

**Application Deadline: Thursday April 4<sup>th</sup>, 2024, by 5:00 p.m. All material must be *received* by due date! The Urban League is not responsible for lost or misdirected mail.**



# URBAN LEAGUE

of Metropolitan Saint Louis, Inc.

EMPOWERING COMMUNITIES. CHANGING LIVES.

## Personal Information Page

### URBAN LEAGUE OF METROPOLITAN ST. LOUIS SCHOLARSHIP APPLICATION FOR THE 2024 – 2025 ACADEMIC YEAR

\*Denotes required item.

\*Date \_\_\_\_\_

\*First Name \_\_\_\_\_ M.I. \_\_\_\_\_ \*Last Name \_\_\_\_\_

\*Permanent Home Address (street) \_\_\_\_\_

\*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip Code \_\_\_\_\_

\*Home Telephone Number ( \_\_\_\_\_ ) \_\_\_\_\_ \*Cell Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_

\*Email Address \_\_\_\_\_ Last 4 numbers of Soc. Sec # \_\_\_\_\_

\*Date of Birth \_\_\_\_\_ \*Age \_\_\_\_\_

\*High School/College/University Currently Attending \_\_\_\_\_

\*Anticipated Month and Year of Graduation \_\_\_\_\_

\*Anticipated or Current College/University Major \_\_\_\_\_

\*U. S. Citizen: (check one)  Yes  No  Pending \*Number of people residing in your household \_\_\_\_\_

Father/Guardian Name \_\_\_\_\_

Address/City/State/Zip \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_

Address/City/State/Zip \_\_\_\_\_

**DO NOT WRITE IN BOX BELOW. FOR OFFICE USE ONLY!**

<p>Date Received _____</p> <p>All required supporting documents <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Reviewed by _____</p>	<p>Awarded <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> BT Hurt <input type="checkbox"/> Leslie <input type="checkbox"/> UMB Wm. Robinson</p> <p>Checked by _____</p>
---	---



# URBAN LEAGUE of Metropolitan Saint Louis, Inc.

EMPOWERING COMMUNITIES. CHANGING LIVES.

1. Describe any special circumstances in your home or family which may affect your educational plans. This may include physical conditions, disability, or family instability. Attach additional pages if necessary.

---

---

---

---

2. WORK & VOLUNTEER EXPERIENCE (Full or part-time, paid or volunteer, including present employment. List all positions held within the last three years. Attach additional pages if necessary:

Employer	Job Title	Employment/Volunteer Dates	Hours/Week	Rate of Pay (If applicable)

3. List any academic honors or awards you have received:

Honor/Award	Year(s) Received	Honor/Award	Year(s) Received

4. Describe extracurricular activities in which you have participated. Include the dates of participation.

Activity	Year(s) Participated	Activity	Year(s) Participated

\*5. Name the school you plan to attend in the Fall of 2021. If undecided, list those to which you have applied.

Name of School	City/State	Accepted Yes or Unknown

\*Provide acceptance letters.



\*6. School classification in Fall 2024 (freshman, etc.) \_\_\_\_\_

\*7. Will you be a full-time student in the Fall 2024 (at least 12 credit hours)?  Yes  No

\*8. Have you or another family member previously received an Urban League scholarship?

Yes  No If yes, what year(s)? \_\_\_\_\_

\*9. Where did you learn about the Urban League Scholarship Program?

\_\_\_\_\_

\*10. Are you affiliated with The Federation of Block Units?  Yes  No

If yes, what is your Block Unit number? \_\_\_\_\_

\*11. Are you a member of NULITES?  Yes  No

### REQUIRED AUTHORIZATIONS

Student must sign:

I authorize the Urban League Scholarship Committee to examine, verify, and discuss my academic and/or financial records and other information which applies to me. Further, I certify to the Scholarship Committee the information provided in this application is true and correct. I understand that the decisions made regarding my participation in the Urban League Scholarship Program are made by the Committee in reliance upon the truth and correctness of my statements.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date



**BEFORE MAILING OR DELIVERING THIS APPLICATION, MAKE SURE THAT THESE ITEMS ARE INCLUDED:**

- Application is completed and signed
- One Letter of recommendation
- 500-word essay is included
- Official transcripts are included or mailed
- Student's Resume
- Wallet-size photograph
- Letter(s) of acceptance

*\*Please note that some schools will not give official transcripts directly to students. They will mail them to the requesting organization or institution. It is the applicant's responsibility to make sure the transcripts are received by the Urban League by the stated deadline.*



## OUR VISION

The vision of the Urban League of Metropolitan St. Louis is that African Americans and others in the St. Louis Region will have the opportunity to create self-sufficient lives in communities that are flourishing with opportunity and growth.

## OUR MISSION

To empower African Americans and others throughout the region in securing economic self-reliance, social equality, and civil rights. The Urban League will be catalyst for this change through advocacy, coalition building, program services, and by promoting communication and understanding among different races and cultures.