



Dr. Laura B. Smith WAM Scholarship - Guidelines & Application Form

Eligibility

Applicants must meet the following criteria:

- Currently participate in the WAM Mentoring Program 2025
- Apply to a STEM Summer Program/Camp for Summer 2025
- Have **at least a B** average in current your math courses
- Intend to enroll in Math, Science, and/or Computer courses in the next school year

Selection & Awards

The Dr. Laura B. Smith WAM Scholarship Committee will select recipients. The recipients are notified in person or by mail. Scholarship checks will go directly to the program that student will attend. The Dr. Laura B. Smith WAM Scholarship Committee will determine the number and amount of awards to be given.

Scholarship Checklist

1. Find a Summer Program related to STEM or STEAM that you would like to attend.
2. Apply to the Summer Program per the program guidelines.
Note: This may require submitting a deposit which is the ***responsibility of the guardian.***
3. You may apply for a WAM scholarship *prior to camp acceptance* by **Friday, February 14, 2025** or *after camp acceptance* is confirmed by **Friday, March 28, 2025** by doing the following:
 - a. Complete the application
 - b. Compose an essay
 - c. Send the application and essay to Scholarship Review Committee**Note:** All applications must be postmarked by the stated deadline in order to be considered.
Incomplete applications are ineligible.
4. Once you are approved for a scholarship (Early scholarship applicants must confirm camp acceptance too), make a copy of the letter and do the following:
 - a. Confirm the scholarship check recipient name and address. **Note:** Scholarship checks will go directly to the program that student will attend.
 - b. Return a signed copy of the letter as proof that you have accepted the scholarship and agree to the guidelines. **Note:** The student and a guardian must sign the letter.

The Application Package

To be considered, applicants must complete and submit the application and attach the required essay written on a separate sheet. These guidelines and application form is also available at: <http://womenandmathmentoring.org/scholarship.php>. A sampling of summer programs recommended by WAM is available at the above-mentioned site.

Note: You may complete this Google Doc form (*please make a copy*) and share it with Amber Smith (amber.e.smith919@gmail.com) OR you may mail your completed application postmarked by **February 14, 2025** (*Early Deadline*) or **March 28, 2025** (*Final Deadline*) to:

Dr. Laura B. Smith WAM Scholarship Committee (Attn: Dr. R. N. Uma)
Department of Mathematics and Physics
North Carolina Central University
1801 Fayetteville St., Durham, NC 27707

Dr. Laura B. Smith WAM Scholarship Application

Name _____ Home Phone (____) _____
Last First M.I.
Address _____
Street City State Zip

Email Address _____

Parent(s)/Guardian _____
Name(s)

Address _____ Business Phone (____) _____

City _____ Zip Code _____

Email Address _____

If Guardian, relationship to Applicant: _____

Current Math Course(s):

Course #1 _____ Current Grade Average _____

Course #2 _____ Current Grade Average _____

Math, Science, and/or Computer Courses You Plan to Enroll in Next School Year

Course #1 _____

Course #2 _____

Course #3 _____

Course #4 _____

Extracurricular Activities in Which You Are Now Active (use extra sheet if necessary)

School Activities _____

Community Activities _____

Special Interests and Hobbies _____

On a separate sheet, in 350 or less of your own words (typed or printed), please write a brief essay stating (1) the summer program to which you have applied and plan to attend (include Camp Name, Contact, Address, Phone, Description, Dates of planned participation, Tuition total and Tuition Deadline); (2) why you are interested in that program; (3) whether you have been accepted yet; and, (4) any additional information which may assist the Selection Committee.

I hereby state that the information contained in this application is true and correct to the best of my knowledge.

Applicant's Signature

Date

Parent(s)/Guardian's Signature*

Date

**I agree and understand that by signing this electronic form that all electronic signatures are the legal equivalent of my handwritten signature*