The Office of African American Affairs Parents Advisory Association (OAAA/PAA) of No.VA/MD/DC was established to support the UVA-OAAA in an effort to develop and sustain programs that provide opportunities, resources, and a support system for African American students at the University of Virginia (UVA).

Our objective is to assist in sustaining OAAA programs that optimize the college experience and promote academic excellence. We are committed to ensuring African-American students thrive academically and achieve high graduation rates.

The UVA-OAAA/PAA of No.VA/MD/DC makes an impact on student life at the University of Virginia by:

- Providing financial support
- Addressing diversity issues at the University of Virginia
- Supporting recruitment and retention
- Promoting the programs and events sponsored by the Office of African-American Affairs (OAAA)

Parents and friends are encouraged to join the PAA and volunteer to work with the different committees ensuring the success of the PAA’s future programs and efforts. For further information concerning the OAAA/PAA, visit the http://www.virginia.edu/oaaa website.

This year, the scholarship amount will be up to $500, and more than one may be awarded.

To be eligible for the scholarships, applicants must:

- Be a rising 2nd, 3rd or 4th year UVA student.
- Have a minimum grade point average (GPA) of 2.5.
- Submit a completed application.
- Not be a past recipient of this scholarship.

The application must be fully completed and submitted no later than May 31, 2018.
PART I: UVA OAAA/PAA OF VA/MD/DC 2018 SCHOLARSHIP APPLICATION FORM (Please print or type.)

Date: _____________

Name: ______________________________________________________________________________________

Permanent Address: __________________________________________________________________________

Phone Number: _______________________________________________________________________________

UVA E-Mail Address: __________________________________________________________________________

Current GPA: ______

Parent Affiliation with the PAA (check one): Yes___  None___

If yes, parents name: _______________________________________________________________________

Please provide answers to the following questions:

1) **List volunteer work in the UVA or Charlottesville community and total number of hours:**

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

   **Total Hrs:** _____

2) **List demonstrated support and involvement at UVA:**

   __________________________________________________________
   __________________________________________________________
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   __________________________________________________________
3) Describe and list activities that you have participated in and/or supported which were sponsored by the OAAA:

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

4) Describe and list activities that you have participated in and/or supported which were sponsored by the OAAA/PAA of No.VA/MD/DC (Receptions, Raffles, Picnics, etc.):

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

1. In 250 words or less, what are your thoughts about the University’s efforts to construct a memorial for enslaved laborers at UVA between 1817 and 1865? With the plight of those laborers in mind, how are you inspired to shape your legacy as a UVA student?:

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________
PART II: ADDITIONAL APPLICATION INFORMATION
Please submit a current copy of your transcript, which includes Fall 2017 grades. A copy printed from the Student Information System (SIS) is acceptable.

PART III: STATEMENT OF ACCURACY
By signing and submitting the OAAA/PAA Scholarship Application you are stating that the information you have provided is accurate and granting permission for the information contained herein to be shared with the OAAA/PAA scholarship selection committee.

Student Signature: ___________________________________________ Date: __________
Please remember the deadline for this application is May 31, 2018. No exceptions will be made.

Please submit your application to:

PAA.NOVA@gmail.com

Privacy Statement: The PAA of No.VA/MD/DC will not sell, trade, share, or otherwise retransmit any Personally Identifiable Information (PII) we collect from this application. This application will be reviewed by the PAA Scholarship Committee only and is for the sole use of applying for the PAA 2018 Scholarship.