



# IT'S POSSIBLE!

## WITH MY SISTERS, INC: B3 SCHOLARSHIP

With My Sisters, Inc. seeks assist young women who exemplify wisdom, motivation, and strength in pursuing their educational goals. We will award \$500 Scholarships to two (2) qualified High School Girls desiring to further their education in either a Trade School, Jr College, Community College or University setting.



### Who's Eligible?

High School Senior Girls,  
Ages 16-19 residing in  
Brunswick (NC) or Horry  
(SC) Counties



### How Do I Apply?

Obtain an Application Packet  
from your School Guidance  
Office or Contact Us via Email:  
**[withmysistersnc@gmail.com](mailto:withmysistersnc@gmail.com)**



### Deadlines?

Jan 1-- Open  
May 1--Submissions Due  
May 15th--Award

## Don't Delay, Apply Today!

Are you a business and/or individual seeking to help sponsor a young lady in her endeavors?  
Contact us for more information on how you can help.

**With My Sisters, Inc.**  
**P.O. Box 1787**  
**Shallotte, NC 28459-1787**  
**B3 Scholarship**

1. DEADLINE for the B3 Scholarship application is **May 1, 2023**. Late applications will not be accepted.
2. Type or print legibly. Illegible applications will be discarded and/or returned to you.
3. If you have any questions about the application, please email O'Keiya Dinnall at [withmysistersnc@gmail.com](mailto:withmysistersnc@gmail.com)

**PERSONAL INFORMATION**

Please <b>type</b> or <b>print</b> your answers. If the application is illegible, it will be discarded and/or returned to you.					
1.	First Name: _____	Last Name: _____			
2.	Mailing Address:: Street/Box: _____  City: _____ State: _____ ZIP: _____				
3.	Daytime Telephone Number: (     ) _____				
4.	Date of Birth:    Month _____ Day _____ Year _____				
5.	In the Fall of 2023, I will be attending college as a: (Circle one) Freshman      Sophomore      Junior      Senior				
6.	Grade Point Average (GPA): _____ (On a 4.0 scale)				
7.	Name & Address of Parent(s) or Legal Guardian(s): Name (s) _____  Street/Box: _____ City: _____ State: _____  ZIP: _____  Best Contact Phone of Parents or Legal Guardians: _____				
8.	Name and City of High School attended: _____				Year Will Graduate/ Graduated: _____
9.	List the name of any College or Trade School you have attended. (If you have not attended college yet, go to Question 11.)	Year Began	Year Ended	Year Graduated (If applicable)	Type of Degree Received (If applicable)
	A. _____	_____	_____	_____	_____
	B. _____	_____	_____	_____	_____
10	What is your intended major in college? _____				

11.	List your community service activities, hobbies, outside interests, and extracurricular activities:
12.	<p>Please attach your essay to this application. The essay must be:</p> <ul style="list-style-type: none"> <li>• A Minimum of 500 words, No More than 600</li> <li>• Typed, 12pt Times New Roman or Arial Font Only</li> </ul> <p><b>Prompt/Topic:</b> Once you've completed your degree/training, how will you give back to your community? What will your contributions be--whether monetary or in deed to help your community thrive?</p>

### STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge.

Signature of Scholarship Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name \_\_\_\_\_

Email Address \_\_\_\_\_@\_\_\_\_\_

**Mail or email application to:**

**With My Sisters, Inc.**  
**Attn: B3 Scholarship Committee,**  
**P.O. Box 1787 Shallotte, NC 28459-1787**  
**Email: [withmysistersnc@gmail.com](mailto:withmysistersnc@gmail.com)**

Completed Application Packets should contain: **Information Form, Essay, Sealed Formal Transcript or Emailed Directly from your School Counselor, and Recommendation Letters (3).**

**\*\*The packets will be accepted until 11:59 pm on the deadline date.\*\***

### **B3 SCHOLARSHIP GUIDELINES**

#### **Requirements for High School Applicants:**

1. Applicants must be female, and a resident of either Brunswick (NC) or Horry (SC) County.
2. Completed applications must be submitted in the year of High School graduation.
3. GPA Requirements: 2.5 or better (if attending a College/University), 2.0 or better (if attending a Trade/Vocational School)
4. Three Letters of Recommendation, as outlined on the application. Immediate family members may not write recommendations on behalf of the applicant.
5. Proof of Acceptance to a 4 Year University, Junior College, Community College, or Trade School for the 2023-24 School Year.
6. Include a 500-600 word essay, titled: **“Giving Back: Community Service After Graduation”**
7. Feel free to include any other information you think is important for the consideration of your application. GPA is only weighted 25% in the decision making process. We are looking for students who are well-rounded.
8. The applications will be reviewed by a committee, and one finalist from each county chosen by May 15th.
9. The \$500 Scholarship Recipients will be announced May 15th and notified via postal mail and email. They will be recognized at a Luncheon or special event--hosted by With My Sisters, Inc. for presentation (late June), as well as their Senior Awards Day (if applicable).
10. Payments to be issued by Cashier's Check, directly to the Student, prior to the start of the 1st enrolled semester.
11. Before payment can be issued, the student must provide Proof of Enrollment by either submitting their Class Schedule or Current School Bill.
12. **With My Sisters, Inc. will not be responsible for any applications lost in the mail or sent to spam.** Confirmation of Receipt will be provided by email for each application submitted.



## Scholarship Application: Letter of Recommendation 1 of 3

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Thank you for submitting a letter of recommendation on behalf of the applicant for the *Be Bold, Be Beautiful, Be Brilliant(B3) Scholarship*, sponsored With My Sisters, Inc. Your evaluation is an important element in the application, and helps the Review Committee understand the applicant. Please make a statement describing the applicant's character, school and community involvement as well as evidence of the student's strengths and weaknesses, not to exceed one page in length. WMS is particularly interested in how you feel the student might adapt/excel while living and studying abroad, if given the opportunity..

Please attach this form to your letter of recommendation. If this is a School Counselor/Administrator, the recommendation must be submitted on business letterhead.

**Please Note: only academic, professional, or community-based recommendations will be accepted. Parents, immediate family members, and friends are not allowed to write this evaluation.**

I am writing this evaluation on behalf of \_\_\_\_\_

Evaluator's name \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

How long have you known the Applicant? \_\_\_\_\_

Is this a confidential evaluation?

☐ Yes

☐ No

Evaluator Signature \_\_\_\_\_ Date \_\_\_\_\_

Letter of Recommendation can be submitted as an email attachment to: [withmysistersnc@gmail.com](mailto:withmysistersnc@gmail.com)

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<p style="text-align: center;">SCHOOL ADMINISTRATOR/COUNSELOR OR EMPLOYER REFERRAL</p>
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## Scholarship Application: Letter of Recommendation 2 of 3

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Thank you for submitting a letter of recommendation on behalf of the applicant for the *Be Bold, Be Beautiful, Be Brilliant (B3) Scholarship*, sponsored With My Sisters, Inc. Your evaluation is an important element in the application, and helps the Review Committee understand the applicant. Please make a statement describing the applicant's character, school and community involvement as well as evidence of the student's strengths and weaknesses, not to exceed one page in length. WMS is particularly interested in how you feel the student might adapt/excel while living and studying abroad, if given the opportunity..

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I am writing this evaluation on behalf of \_\_\_\_\_

Evaluator's name \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

How long have you known the Applicant? \_\_\_\_\_

Is this a confidential evaluation?

☐ Yes

☐ No

Evaluator Signature \_\_\_\_\_ Date \_\_\_\_\_

Letter of Recommendation can be submitted as an email attachment to: [withmysistersnc@gmail.com](mailto:withmysistersnc@gmail.com)

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COMMUNITY-BASED  
REFERRAL



## Scholarship Application: Letter of Recommendation 3 of 3

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Thank you for submitting a letter of recommendation on behalf of the applicant for the *Be Bold, Be Beautiful, Be Brilliant(B3) Scholarship*, sponsored With My Sisters, Inc. Your evaluation is an important element in the application, and helps the Review Committee understand the applicant. Please make a statement describing the applicant's character, school and community involvement as well as evidence of the student's strengths and weaknesses, not to exceed one page in length. WMS is particularly interested in how you feel the student might adapt/excel while living and studying abroad, if given the opportunity..

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I am writing this evaluation on behalf of \_\_\_\_\_

Evaluator's name \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

How long have you known the Applicant? \_\_\_\_\_

Is this a confidential evaluation?

☐ Yes

☐ No

Evaluator Signature \_\_\_\_\_ Date \_\_\_\_\_

Letter of Recommendation can be submitted as an email attachment to: [withmysistersnc@gmail.com](mailto:withmysistersnc@gmail.com)

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EMPLOYER/TEACHER/MENTOR  
OR CLOSE FRIEND  
REFERRAL