



National Association of Buffalo Soldiers & Troopers Motorcycle Club, Central Florida Chapter



**2024/5 Scholarship Program
Application Deadline: March 30, 2025**

The philosophy of the Buffalo Soldiers Motorcycle Club Central Florida is:

- Promote the history of African American and those who have served as veterans.
- Be a positive role model for youth in our community.
- Support our veterans by visiting them and their families and supporting our fallen heroes.
- Support charitable organizations in our community.
- Uphold the standards and traditions of the National Association of Buffalo Soldiers and Troopers Motorcycle Club.
- Promote motorcycle safety in our community.

The BSMC Central Florida will mail scholarship funds on behalf of the student, upon verification of enrollment to the college or university the student will be attending. A scholarship of \$500 will be awarded based on a completed application packet, which includes financial need, qualifications, essay, and supporting documentation.

Instructions for candidates:

The following are required to complete your application:

- An official High School Transcript (or equivalent if home schooled)
- A 500-word essay on the topics described below in Essay Topics.
- A letter of recommendation on official letter head signed by a teacher, guidance counselor, or school administrator.
- A letter of recommendation on letterhead from a community service organization.
- A letter of acceptance to an institution of higher learning.
- If the applicant is under the age of 18 at date of application submission, a letter of consent to participate in this scholarship award program signed by a parent(s) or guardian must accompany the application.
- A letter of introduction, including who you are, your accomplishments (including honors and awards to date), family background, the degree you are seeking, and financial need. Also, provide a summary of how you plan to use the \$500 scholarship if selected.
- A recent professional headshot photo (in good taste). DSP Senior Portrait preferred.
- Student's name, the complete name and address of the school and/or financial aid office where the student will be attending school and student ID number. A scholarship check will be mailed by the Treasurer to the College/or University via the student's account.
- Complete all forms in their entirety. Attach additional pages, if required.
- Incomplete applications will not be considered.

Essay Topics:

Write a 500-word essay (typewritten) on one of the following topics:

****Do not write about the Buffalo Soldiers Motorcycle Club****

- A. What impact did the Buffalo Soldiers make in war and/or peacetime? Why is it necessary to pass this legacy on to future generations?
- B. Provide specific examples of how the Buffalo Soldiers facilitated the development of roadways, national parks, and mail service.
- C. The Congressional Medal of Honor is presented to the recipient by the President of the United States in the name of Congress. Please provide a brief narrative regarding a Buffalo Soldier that received this honor and what can be learned from his life, efforts, and commitment to duty.

Submit Application:

Completed applications and required documents must be scanned and emailed to: bsmccentralfloridasecretary@gmail.com. Please type your full name in the subject line. All sealed transcripts must be sent to the mailing address below by March 30, 2025. Complete packets can also be sent to this mailing address. **Incomplete packets will not be considered.**

Mail official transcripts to:

**NABSTMC Central Florida Chapter
PO Box 8273
Cocoa, Florida 32924-8273**



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2024/5 Scholarship Program
Application Deadline: March 30, 2025

Name of local Buffalo Soldier Chapter: Central Florida

Contact Information:

First Name:		Last Name:	
Address:			
City:		State:	
Zip Code:		Email:	
Home Phone:		Cell Phone:	
Date of Birth:		Gender:	

Academic Information:

High School Name:		City / State	
Graduation Date:		GPA:	
Class Rank:		Class Size:	

College Information (If you have not finalized your college choice, provide your first-choice school.):

College Name:		City / State:	
Institution Type: Certificate Four-Year Two-Year Vocational or Technical:			
Degree Sought: Associates Bachelor's Certificate			
Major:			
Anticipated Graduation Date:			

Applicant Service, Extracurricular Activities and Work Experience:

Use this space to provide the applicant's volunteer service, extracurricular activities and work experience during the applicant's academic career. **Do not attach a resume in lieu of completing this form. It will not be reviewed.**

Description			
Total Hours or Average Hours per week:		Are you still participating? (yes / no)	
Start Date:		End Date:	
Highest Position Held:			

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Terms & Conditions:

I, _____ (Full name) certify, to the best of my knowledge the information on this application is complete and accurate. I understand falsification of any information will cause my disqualification from the scholarship competition.

(1) It is my responsibility to make sure the application process is completed and submitted by the required deadline. If not, the application may be disqualified from the scholarship review board and may not be considered for an award.

(2) This application, upon receipt, becomes the property of the program sponsor.

I agree that, if selected as an award winner for the National Association of Buffalo Soldiers and Troopers Motorcycle Club Scholarship Program, the program sponsor or its agents may use my name and likeness and any other information or materials provided in connection with this program for purposes of news, publicity, and advertising in all media, including but not limited to print and electronic media, press releases, internet websites and video media.

To comply with the provisions of the Family Educational and Privacy Act of 1974, I hereby grant permission for school officials to release secondary school records and other requested information, if necessary.

If you are under 18, your parent or guardian must also agree to these Terms and Conditions.

Applicant Signature: _____ **Date:** _____

Parent Signature: (if applicable) _____

**** Local Chapter/Frontier must acknowledge receipt before sending to National Scholarship Committee.**

Chapter _____ Signature _____