

NAME OF YOUR HIGH SCHOOL: _____

MAILING ADDRESS OF SCHOOL: _____
(number, street or route) (city, state & zip)

SCHOOL PRINCIPAL'S NAME: _____
(last) (first) (middle)

CLOSING DATE OF SCHOOL: ____/____/____ AWARDS DATE: ____/____/____

I hereby make application for consideration as a candidate for the Otis N. Brown Memorial / Billy Ray Cameron Scholarships. I understand that to be eligible to apply, I must be a Senior and intend to enroll in a college in North Carolina, also the member under whom I am applying **MUST BE A 2020 CURRENT AND 2019 PREVIOUS YEAR MEMBER AND THIS FORM MUST BE SIGNED BY THE POST OR AUXILIARY OFFICER.**

A confidential application will be mailed to you after receipt of this form to be filled out and returned before April 15, 2020.

Student's Signature: _____ Date: / / _____

Return this preliminary application **BEFORE FEBRUARY 15, 2020**

Otis N. Brown Memorial / Billy Ray Cameron
Scholarship Committee
P.O. Box 25337
Raleigh, NC 27611

THIS FORM MAY BE DUPLICATED FOR DISTRIBUTION TO STUDENTS