



NATIONAL COUNCIL ON BLACK AMERICAN AFFAIRS

## Dr. Marian C. Shivers Scholarship Application 2011

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In an effort to recognize the significance of the NCBA Leadership Development Institute, the impact of this program on the lives and careers of those that benefit from the experience, and to recognize the spirit and foresight of the woman largely responsible for the success of the institute, the 2007 NCBA Scholars, established the **Dr. Marian C. Shivers Scholarship**. This need-based merit award of \$1000 will be presented annually, to the institute applicant who demonstrates an understanding of the community college mission and the students it serves, exemplary service in the community college setting, progressive advancement toward leadership positions in the community college and the need for financial assistance.

The deadline for all applications is **August 26, 2011**. Applications must be submitted via email to [marianshivers@bellsouth.net](mailto:marianshivers@bellsouth.net). As Dean of the Institute, I will accept applications but a committee will make the selection. You or your college will be reimbursed if your institute fee has been paid. It is imperative that you submit your application for the Institute as soon as possible so that a space can be reserved for you since NCBA accepts only 20-25 participants.

Selection of the scholarship recipient will be based on the criteria listed below.

### Scholarship Criteria:

Please provide written documentation for the following:

- at least 5-10 years of progressive experience in the field of higher education with an emphasis on the community college
- an understanding and appreciation for the community college mission and its students
- progressive advancement toward leadership positions within the community college system
- the source of any financial assistance (use form below)
- complete and return the information form below

**Contact: Marian Shivers ([marianshivers@bellsouth.net](mailto:marianshivers@bellsouth.net)) if you need clarification or more information.**

# Dr. Marian C. Shivers Scholarship Application Information Form

Please complete the form below and forward it along with the other documentation.

<b>Name</b>  
<b>College:</b>  <b>Name:</b> _____  <b>Position:</b> _____  <b>Address:</b> _____  <b>Phone Number</b> _____ <b>email:</b> _____
<b>Home:</b>  <b>Address:</b> _____  <b>Phone Numbers: Home:</b> _____ <b>Cell:</b> _____  <b>Email</b> _____

## Source of Funding:

Institution: \_\_\_\_\_% Self: \_\_\_\_\_% Other: \_\_\_\_\_%