



National African American Insurance Association
Dallas-Fort Worth Chapter
10455 North Central Expressway, Suite 109-186
Dallas, TX 75231

August 28, 2019

Dear Scholarship Applicants,

The National African American Insurance Association – Dallas-Fort Worth Chapter is now accepting applications for our Annual Scholarship Program. Winners will be announced in December and formally recognized at our Scholarship Luncheon on January 10, 2020. The attendance of all winners will be required. Award amounts are \$1000 and \$1500.

Applicants will be judged on the following:

1. GPA of 2.75 (on a scale of 4.0)
2. 500 Word Essay
3. 2 Letters of Recommendation
4. Community Involvement
5. Completed Application
6. Official Copy of Transcripts

Please contact us at naaiadfw@gmail.com for any questions.

Sincerely,

Tiara Morris

Tiara Morris
President, NAAIA-DFW

Kristen Jenkins

Kristen Jenkins
Scholarship Chair, NAAIA –DFW



ABOUT NAAIA

The National African American Insurance Association (NAAIA) was organized to create a network among minorities who are employed by insurance companies or self-employed in the insurance industry. Pooling this wealth of talent contributes to the growth of the association and its members through sharing of professional experience, knowledge, and information.

NAAIA will attempt, on a continuous basis, to promote professionalism in a manner that will lead to industry recognition and future career opportunities. NAAIA shall coordinate the national efforts of the African-American insurance organizations and professionals.

The organization will also invite individual memberships from those who do not have a local chapter in their area. If interest does exist to build a local chapter in a respective city, the NAAIA will contact the nearest member association for follow up.

NAAIA shall engage in the following activities: quarterly newsletter, plan and promote national conferences, advocacy involving national issues, has an influence in many insurance-related areas, and maintain an insurance database.

ABOUT NAAIA-DFW

Our Mission

To engage African American insurance professionals in the DFW area in activities that support education, leadership and professional development and to enhance their current professional experience through networking and mentoring.

Our Vision

Our vision is for a better insurance industry; one that is strengthened by increased diversity at every level and in every area of expertise.

Contact Us

www.naaia.org

www.naaiafw.org

Email: naaiadfw@gmail.com



SCHOLARSHIP ELIGIBILITY

For minority high school students interested in pursuing a career in insurance:

1. Provide proof of enrollment to a 2 or 4 year university
2. Official copy of high school transcript (Minimum GPA 2.75)
3. 500 word essay: "Why am I a strong candidate for the NAAIA DFW Scholarship?"
4. Two letters of Recommendation from a community leader, employer, or teacher

For minority college students majoring in Risk Management, Insurance, Business, Math, Finance, Accounting, or Engineering:

1. Must be a student at a 2 or 4 year university
2. Official copy of college transcript (Minimum GPA 2.75)
3. 500 word essay: "Why am I a strong candidate for the NAAIA DFW Scholarship?"
4. Two letters of Recommendation from a community leader, employer, or professor

ESSAY TOPIC: "WHY AM I A STRONG CANDIDATE FOR THE NAAIA DFW SCHOLARSHIP?"

1. All essays must be in size 11 font, Times New Roman text, double spaced, and limited to two pages.
2. Essays must contain specific facts and reasonings which support your case.
3. Do not mention your name anywhere in the essays.
4. All essays should have your application number in the top right header. Your application number will be your birthday (i.e Sept 20, 1989 has an application number of 092089).



Submit all applications e-mail all applications to:

naaiadfw@gmail.com

Subject: NAAIA DFW Scholarship Application

If you have any questions, please email us at naaiadfw@gmail.com with “NAAIA DFW Scholarship Inquiry” as the Subject. **DEADLINE IS FRIDAY, November 15, 2019. All applications must be postmarked by November 10th.**



NATIONAL AFRICAN - AMERICAN
INSURANCE ASSOCIATION

Dallas Fort Worth Chapter

APPLICANT INFORMATION

Last Name:		First Name:	
Email address:		Application # (MMDDYY):	
Street Address		Apt #:	
City:	State:	Zip Code	
Cell number:		Home number:	

SCHOOL INFORMATION

University:		Classification:	
Major:		Minor:	
GPA:		Expected Graduation Date:	
Street Address:		P.O.Box/Suite	
City:	State:	Zip Code	

AGREEMENT AND SIGNATURE

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that as an applicant, any false statements, omissions, or other misrepresentations made by me in this application may affect my eligibiity for this scholarship.

Name (printed)	
Signature	
Date	