

Alpha Kappa Alpha Sorority, Incorporated

Epsilon Pi Omega Chapter

Queens County, New York

The Epsilon Pi Omega Chapter invites High School Seniors, male and female, of African-American and Pan Caribbean heritage to apply for our one-time \$1000 incentive scholarship. Successful candidates must demonstrate academic achievement, exhibit leadership ability and participate in community service activities. The recipients may use the academic based scholarship to attend any two or four-year college or university to cover the costs of tuition, fees, books, room & board, computers, health insurance, and other college related expenses.

Students competing for the Epsilon Pi Omega Scholarships must meet the following criteria:

- . Applicant must be a high school senior residing in Queens County.
- . Applicant must be of African-American or Pan Caribbean or Pan African descent.
- . Applicant must enroll in a full-time undergraduate program no later than the fall of their graduation from H.S.

Epsilon Pi Omega Scholarship Selection Process:

- . Applicant attained a cumulative Grade Point Average of 85 or better by June 30th of their junior year.
- . School and community involvement.
- . Demonstrated leadership ability.
- . Effective oral and written communication skills.

Notification to Applicants

Applicants will be notified of their application status in May. All scholarships are awarded through the Pearls & Ivy Foundation of Queens, Inc., a 501(c) (3) organization. Scholarship awards will be given at the Epsilon Pi Omega Community Charter Day event on **June 10, 2018**. Checks will be distributed upon receipt of the students' proof of enrollment in an accredited institution in the fall of their graduation year.

Applications are due by final postmarked deadline of February 16, 2018.

Please print and mail with all requested Scholarship materials included in one packet.

You **MUST** include a copy of your June 30th transcript and most recent SAT scores.

Transcripts and letters of recommendation MUST be included.

Incomplete applications will not be considered.

Return Completed Application To:

Alpha Kappa Alpha Sorority, Inc.

Epsilon Pi Omega Chapter

P.O. Box 120553

St. Albans, NY 11412

Attn: Scholarship Chairman

Or email to: Scholarshipepio@gmail.com



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SCHOLARSHIP APPLICATION

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Applicant Name

Male Female

First: MI: Last: DOB:mm/dd/yyyy

Address
Street: Apt.#:
 State: Zip Code:
Phone: (xxx) xxx-xxxx Email:

Parent or Guardian
Contact Information

First: MI: Last:

Phone: (xxx) xxx-xxxx Alt. Phone: (xxx) xxx-xxxx

Name of High School:

Address:

Guidance Counselor / Advisors Name: Phone: (xxx) xxx-xxxx

How did you hear about this scholarship? School Official Internet Friend / Relative Other

Extracurricular Activities

Please list all school related activities you have participated in.

	Description of Activities
1.	<input type="text"/>
2.	<input type="text"/>
3.	<input type="text"/>
4.	<input type="text"/>

Hobbies and Special Talents

Please list your hobbies and or special talents you would like to share.

	Description of Activities
1.	<input type="text"/>
2.	<input type="text"/>
3.	<input type="text"/>

Colleges / Universities Please list schools to which you have applied.

	Name of Institution	City	State	Zip Code (ex. 12345)	Notified of Acceptance (Y or N)
1.					
2.					
3.					
4.					
5.					

Community Volunteer Service

List and describe the volunteer service activities you have participated in during your High School experience.

Where did you volunteer? (Name of Agency)	What did you do? (Responsibilities)	Total Hours Volunteered (ex. 30.0)	Supervisor's Name and Contact Number

Employment Please list any paid positions you have held.

Where did you work? (Name of the Agency)	What did you do? (Responsibilities)

Educational Plans Please use the field below to give us a brief description of your career goals.

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Personal Statement: In a well - organized word essay of approximately 300 words, describe a community problem you'd like to solve. It can be anything of personal importance to you, no matter the scale. Explain why this problem matters to you, the steps you might take to address it, and the solution you hope to see. You may use the field provided below or submit a double-spaced document in Times New Roman 12 pt. font. Be sure to include your name at the top of the essay page.

Letters of Recommendation

Please provide three letters of recommendation; one from a school counselor or teacher; one from a church or community leader and one from a family friend. Family can include parents, grandparents, siblings, guardians, relatives, friends or people in the community.

APPLICATION CHECKLIST

The application is only considered complete and valid when all items listed are mailed together.

- Official High School Transcript Personal Statement Copy of SAT Scores 3 Letters of Recommendation

Signature of Applicant _____ Date _____

Application must be postmarked by February 16, 2018