Alpha Kappa Alpha Sorority, Inc.

Mail to: AKA Lambda Nu Omega

P.O. Box 8528

Waukegan, IL 60079

Scholarship Application for Lambda Nu Omega Deadline March 1, 2016

|  |  |
| --- | --- |
| Personal Data | |
| Applicant name |  |
| Home address |  |
| Phone Number |  |
| Email |  |
| Date of birth |  |
| Current high school |  |
| Schools attended in the past four years |  |
| Rank in class / Grade point average |  |
| Date of application |  |
| Activities | |
| List your extra-curricular activities |  |
|  |
|  |
|  |
|  |
| List offices held |  |
|  |
| List community involvement |  |
|  |
|  |
|  |
| Honors and Awards | |
| List honors and awards |  |
|  |
|  |
| Employment | |
| List employer(s) and date(s) of employment |  |
|  |
|  |
|  |
| College/University Plans | |
| College/University of your choice |  |
| Why did you choose this college/university? |  |
|  |
|  |
|  |
|  |
| List colleges/universities where you have been accepted |  |
|  |
|  |
| Additional Information | |
| Name a person you admire and explain why |  |
|  |
|  |
| Family Information | |
| Give names and ages of your siblings, indicating whether they are dependent upon your parents for main support |  |
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| --- | --- | --- | --- | --- | --- | --- |
| Anticipated Yearly School Budget | | | | | | |
| Expenditures (approximate) | | | | Income | | |
| Tuition and Fees | | $ | | Money available 1st year | | $ |
| Room and Board | | $ | | Allowance from family | | $ |
| Books and Supplies | | $ | | Income from summer employment | | $ |
| Transportation | | $ | | Income from employment during school year | | $ |
| Clothing | | $ | | Anticipated income from other sources (specify) | | $ |
| Total expenditures | | $ | | Total income | | $ |
| If these columns do not balance, from what source(s) do you expect to secure additional funds? (include student loans) | | |  | | | |
|  | | | |
|  | | | |
|  | | | |
|  | | | |
| List other scholarships for which you have applied | | |  | | | |
|  | | | |
|  | | | |
| List other scholarships you plan to receive | | |  | | | |
|  | | | |
|  | | | |
|  | | | |
| Parents | | | | | | |
| Father’s name |  | | | Mother’s name |  | |
| Living? |  | | | Living? |  | |
| Father’s employer |  | | | Mother’s employer |  | |
| Father’s position |  | | | Mother’s position |  | |
| Father’s signature: | | | | Mother’s signature: | | |
| Date: | | | | Date: | | |
| Personal Statement | | | | | | |
| In 300 words or less, write a personal statement that highlights your vocational goals and expectations for college, as well as, any other pertinent information. Use the space below. | | | | | | |

**PERSONAL STATEMENT**

Alpha Kappa Alpha Sorority, Inc. Lambda Nu Omega

**Photo Release Consent Form**

Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ High School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby consent to participation in interviews, the use of quotes, and the taking of photographs, movies or videos of the Student named above by Alpha Kappa Alpha Sorority, Inc.

I also grant to Alpha Kappa Alpha Sorority, Inc. the right to edit, use and reuse said products including use in print, on the internet, and all other forms of media, whether electronic, print or digital and whether now known or hereafter existing.

I also hereby release Alpha Kappa Alpha Sorority, Inc. and its members from all claims, demands, and liabilities whatsoever in connection with the above.

Signature of Parent/Guardian (if student is under 18):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_

Address of Parent/Guardian:­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OR**

Signature of Student (if student is 18 or over):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_

Address of Student:­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Return this signed form with the scholarship application**

**SCHOLARSHIP RECOMMENDATION FORM**

**TO BE COMPLETED BY HIGH SCHOOL**

The applicant, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, is / is not recommended for consideration for an Alpha Kappa Alpha Sorority Scholarship.

The scholastic achievement of this applicant is as follows:

A. Will graduate on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

B. Class standing is \_\_\_\_\_\_\_\_\_\_\_ in a class of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

C. SAT score \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or

D. ACT score \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This applicant’s leadership qualities are as follows:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This applicant’s character is as follows:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This applicant has participated in the following high school extra-curricular activities:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The additional remarks pertain to the applicant’s application for an Alpha Kappa Alpha Sorority Scholarship:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Signature Title Date