



ALPHA KAPPA ALPHA SORORITY, INC.
Theta Sigma Omega Chapter
Hattiesburg, Mississippi
www.thetasigmaomega.org



2017 Academic Scholarship Application
\$1,000 Award

APPLICANT CRITERIA

All Participants MUST:

1. Graduate from high school during the academic year in which the scholarship is awarded,
2. Have a least a “B+” (88) average,
3. Fully complete scholarship application and all accompanying documents,
4. Have a least one (1) letter of recommendation from a teacher, member of Alpha Kappa Alpha Sorority, Inc., or a community leader,
5. Have Counselor Recommendation Form Completed by High School Counselor in a sealed envelope,
6. Submit a personal essay, “Why I should be awarded the Theta Sigma Omega Academic Scholarship.” Include in this essay, factual information about you, your family, your educational and career goals, and your plans to achieve them. Essay should be 200-400 words, typed in times New Roman, 12pt font, double spaced.
7. Include with application your current high school transcript in a sealed envelope,
8. Show proof of acceptance to a college or university prior to receipt of scholarship in Fall. (Please present official written documentation from the college or university of enrollment to the Scholarship Committee Chair or to the Chapter President),
9. Enter an accredited college or university by the fall of the year of graduation.

INCOMPLETE APPLICATIONS, OR THOSE THAT DO NOT MEET ALL REQUIRED CRITERIA AND FORMATTING WILL NOT BE CONSIDERED. THIS APPLICATION, AND ALL REQUIRED DOCUMENTS, MUST BE RECEIVED BY COMMITTEE CHAIR NO LATER THAN APRIL 17, 2017, AND SHOULD BE MAILED TO THE ADDRESS SHOWN BELOW:

ALPHA KAPPA ALPHA SORORITY, INC.
THETA SIGMA OMEGA CHAPTER
ATTN: Academic Scholarship Committee
Post Office Box 17942
Hattiesburg, Mississippi 39404

THE SCHOLARSHIP WILL BE SENT DIRECTLY TO THE COLLEGE OR UNIVERSITY OF ENROLLMENT IN THE NAME OF THE SCHOLARSHIP RECIPIENT.

About Alpha Kappa Alpha Sorority, Inc.

Alpha Kappa Alpha Sorority, Incorporated had its humble beginnings as the vision of nine college students on the campus of Howard University in 1908. Since then, the sorority has flourished into a globally-impactful organization of over 290,000 college-trained members, bound by the bonds of sisterhood and empowered by a commitment to servant-leadership that is both domestic and international in its scope. As Alpha Kappa Alpha has grown, it has maintained its focus in two key arenas: the lifelong personal and professional development of each of its members; and galvanizing its membership into an organization of respected power and influence, consistently at the forefront of effective advocacy and social change that results in equality and equity for all citizens of the world.

**ALPHA KAPPA ALPHA SORORITY, INC.
Theta Sigma Omega Chapter**

2017 Academic Scholarship Application

PERSONAL DATA

Name: _____ Date of Birth: _____

Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Mother's Name: _____ Occupation: _____

Father's Name: _____ Occupation: _____

Parent's Marital Status: _____ Married _____ Divorced _____ Single _____ Other

With whom do you reside? _____

Number of Siblings Living at Home: _____ Number enrolled in College: _____

Ethnicity: _____ African-American _____ Asian _____ Caucasian _____ Hispanic _____ Other

Please indicate your Family's Adjusted Gross Income from the most recent Federal Income Tax Return:

_____ <\$25,000 _____ \$25,000-\$35,000 _____ \$35,000-\$45,000 _____ \$45,000-\$55,000 _____ >\$55,000

EDUCATIONAL BACKGROUND

Name of High School currently attending: _____

Anticipated Date of Graduation: _____ Honors Graduate: _____ yes _____ no

Cum GPA (on 100 pt scale) _____ ACT Composite _____ SAT Composite* _____

*note SAT scores may not be combined from multiple tests

List all awards received while attending high school: _____

List all scholarships awarded: _____

List All High School Club/Organization Memberships and Leadership Roles: _____

List All High School Community Service Activities: _____

Future Plans

Name of college you plan to attend: _____

Intended College Major: _____

Why have you selected this college and major? _____

What are your career goals? _____

Applicant Agreement Statement:

- I verify that all information included on this application is true and accurate.
- I give permission for the Theta Sigma Omega Chapter and Alpha Kappa Alpha Sorority, Inc. to publicize my award, picture, and information regarding college of attendance.
- I will provide my social security number, college ID#, and a picture of myself as needed.

Signature of Applicant

Date of Signature

Signature of Parent

Date of Signature

FOR OFFICE USE ONLY	APPLICATION RECEIVED BY:	DATE APPLICATION RECEIVED: