

FAMILY INFORMATION

Parent/Guardian Name(s)

Mailing Address

Daytime Telephone

Evening Telephone

E-mail Address

Occupation

Company

WORK/INTERNSHIP EXPERIENCE

List any jobs, including summer employment you have held during your high school years. Please include dates.

How did you hear about the Theta Epsilon Omega Scholarship?

- Guidance Counselor Teacher Principal Family Member/Friend
 Member of Theta Epsilon Omega Chapter Browsing www.akanewhaven.org Other

If Other, please briefly explain

Alpha Kappa Alpha Sorority, Inc.[®] Theta Epsilon Omega Chapter

Serving Greater New Haven since 1965



Scholarship Application

2018

Khalilah L. Brown-Dean, President
P.O. Box 8298
New Haven, CT 06530

www.akanewhaven.org

Visit www.akaef.org for other scholarship opportunities from Alpha Kappa Alpha Sorority, Inc.[®]

ATTENTION
GRADUATING CLASS
OF 2018

Alpha Kappa Alpha Sorority, Inc.®, Theta Epsilon Omega Chapter is offering a four-year scholarship up to \$4,000.00 to a graduating senior in the top third of his or her class. The applicant must verify acceptance to and attendance at an accredited post-secondary school or college. The applicant must reside in Greater New Haven.

Students applying must submit the following postmarked by April 11, 2018:

1. Completed application.
2. An official transcript with ACT or SAT scores. Transcripts must have an affixed seal and signature.
3. Two letters of recommendation from:
 - a. Your guidance counselor and a teacher of an academic subject **OR**
 - b. Two teachers of an academic subject.
4. A typewritten, double-spaced, and MLA style autobiographical essay. Essay shall be a minimum of 500 words and a maximum of two (2) pages.

The entire application packet should be checked by your guidance counselor or a teacher.

Applicant must forward the complete application packet to: Alpha Kappa Alpha Sorority, Inc., Theta Epsilon Omega Chapter, Attention: Scholarship Chairman, P.O. Box 8298, New Haven, CT 06530

The selected applicant will be notified by May 14, 2018.

Address all questions to
scholarship@akanewhaven.org

For more information about our scholarship program or to download a fillable application form, visit
www.akanewhaven.org/scholarship.

ALPHA KAPPA ALPHA SORORITY, INCORPORATED®
THETA EPSILON OMEGA CHAPTER

2018 Scholarship Application

HIGH SCHOOL INFORMATION

High School _____ City _____

Guidance Counselor _____

PERSONAL INFORMATION

Full Name _____

Mailing Address _____

Telephone _____ E-mail Address _____

Birth Date _____ Gender Male Female

Describe any scholastic distinctions, honors or awards you have received beginning with the ninth grade. Please include dates. You may use a separate sheet, if necessary.

List your extracurricular activities and hobbies, including church, community and volunteer services. Please include dates. You may use a separate sheet, if necessary.