



**A Plus Foundation, Inc.
Alpha Kappa Alpha Sorority, Inc.
Chi Psi Omega Chapter**



2020 SCHOLARSHIP APPLICATION

\$1,000.00 Merit Based Scholarship

\$500.00 Book Scholarship

ELIGIBILITY:

This scholarship will be awarded to graduating seniors from high schools in Broward County with a Grade Point Average (GPA) of 2.0 or higher. The scholarship is based on the following criteria:

- Academic Achievement
- Financial Need
- Leadership Abilities
- School, Church, and Community Activities
- Character

REQUIRED FOR SCHOLARSHIP: Application will not be considered without the requirements below

1. Type or print information in ink on the form.
2. Include one (1) letter of recommendation with the application.
The letter of recommendation must be on official letterhead from the following persons who have knowledge of your academic achievement or community service:
 - Teacher or Principal
 - Guidance Counselor or BRACE Advisor
 - Community or Civic Leader
 - Minister
3. Parents 2019 W2 Wage and Tax Statement.
4. 500 Word Essay
5. BRACE or Counselor completed and signed Academic Information (transcript not needed)
6. Current Photo (Any size)
7. Completed and Signed Application

PLEASE NOTE:

ONLY a completed application will be processed.

The application must be:

Postmarked by Friday, March 20, 2020

E-mailed by 11:59 PM Friday, March 20, 2020

**Attach
Any Size
Photo**

APPLICATION INFORMATION

CHECK ONE

- Regular Application for Scholarship
 Application for Scholarship with the intent of attending a Historically Black College or University (HBCU)

LEGACY CANDIDATE

- Check if mother, grandmother, mother of adopted child, stepmother, legal guardian (legally placed by an appropriate court of law) and is an active member of Alpha Kappa Alpha Sorority, Inc. Chi Psi Omega Chapter. _____
Name of Sorority Member

Date of Birth: _____

Last Name	First Name	Middle Name
Street Address	City/State Zip Code	High School Name
Student's Cell Phone Number	Secondary Phone Number	Print Email Address

LEADERSHIP ACTIVITIES:

- A. List major school-related activities/organizations (offices held, committee assignments, awards, competitions, etc.). Use additional paper if necessary.

	Activity/Organization	Awards/Honors	Year
1.			
2.			
3.			
4.			

- B. List the various community-related activities.

	Activity/Organization	Awards/Honors	Year
1.			
2.			
3.			
4.			

ESSAY:

(Attach on separate sheet to application)

Please type or write a 500-word essay answering the following question:

What activities (academic, athletic, cultural, community-related, occupational, etc.) do you participate in that most build and reflect your character?

(Essay's under or over 500 words will receive point deductions)

SCHOLARSHIP DATA:

COLLEGE/UNIVERSITIES:

List **only** the colleges/universities to which you have been **accepted**.

Name of College/University	City	State

***** COUNSELOR'S USE ONLY *****

ACADEMIC INFORMATION:

Scholastic/Academic Achievement

_____ **Unweighted GPA**

_____ **Weighted GPA**

_____ **Signature of Counselor/BRACE Advisor**

_____ **Date**

FAMILY INFORMATION:

Attach a copy of parent(s) **2019 W2 Wage and Tax Statement**. (MUST ATTACH TO BE CONSIDERED)

_____ **Mother's or Guardian's Name**

_____ **Father's or Guardian's Name**

_____ **Number of Adults in household**

_____ **Number of minors or students in household**

_____ **Parent/Guardian(s) Annual Income**

_____ **Total Number in Household**

Attach a copy of parent(s) **2019 W2 Wage and Tax Statement**. (MUST ATTACH TO BE CONSIDERED)

Media Release: (select one option)

_____ I will permit my child to be photographed, videotaped, and/or interviewed for publication on the World Wide Web, social network sites, in press materials and in advertising and marketing materials. I hereby specifically release Alpha Kappa Alpha Sorority, Inc or the A Plus Foundation, Inc., of Chi Psi Omega Chapter and its agents from any and all claims arising from the use of your child's name, image and/or likeness based on any of the uses stated above.

_____ I will **NOT** permit my child to be photographed, videotaped, and/or interviewed for publication on the World Wide Web, social network sites, in press materials and in advertising and marketing materials.

Student's Signature:

Parent or Guardian's Signature

SUBMISSION

Choose Mail or E-mail

Mail to:

**A Plus Foundation
Charitable Arm of Chi Psi Omega Chapter of
Alpha Kappa Alpha Sorority, Incorporated
Attention: Scholarship Committee
P.O. Box 770295
Coral Springs, Florida 33077**

**Deadline: This application must be postmarked by Friday, March 20, 2020
Make sure all attachments are included and signatures are original.
Electronic signatures will NOT be accepted.**

OR

E-Mail to:

APlusFoundation1908@gmail.com

**Deadline: 11:59 PM Friday March 20, 2020.
Make sure all attachments are included and signatures are original.
Electronic signatures will NOT be accepted.**

- Please review the application prior to mailing OR e-mailing.
- Make certain that it is complete, and all attachments are included.
- You will not be notified of incomplete applications.
- Incomplete applications WILL NOT BE reviewed.