

## ZETA PHI BETA SORORITY, INC. PSI ALPHA ZETA CHAPTER P.O. BOX 192



MADISON, AL 35758

Email: psialphazeta@gmail.com Britt Rodgers-Mitchell, President

## **CRITERIA FOR APPLICATION:**

- The scholarships are open to <u>Female High School Seniors</u> who attend the Madison City School District or the Madison County School District in Alabama.
- Applicant must have applied for acceptance to an accredited two or four-year college/university as a full-time student.
- Applicant must have earned at least a 3.0 grade point average on a 4.0 scale.
- Applicant must have participated in community service events, have a firm academic foundation, and demonstrated leadership in extracurricular activities.
- Applicant must include a copy of a 3' by 5' photo.
- Applicant must provide college or university acceptance and enrollment letter to receive funds.
- Applicant must provide an official high school transcript including the 1st marking period of 12th grade.
- Applicant must provide two (2) signed letters of recommendation on official letterhead that will provide information about their character and/or financial need. One (1) letter must be from a teacher, advisor, or guidance counselor and the other (1) letter may be from work, church, or a community affiliation.
- Applicant must submit an essay by choosing one of the statements and follow the Essay criteria provided.
- Applicant must submit a completed application packet with the supporting documentation postmarked on or before March 31, 2024 to:

Zeta Phi Beta Sorority, Inc.
Psi Alpha Zeta Chapter
Attn: Scholarship Committee
P.O. Box 192
Madison, AL 35758

**NOTE:** Late and/or incomplete application packets will NOT be considered.

• Awardees will be notified on or before **April 30, 2024.** 



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## **2024 Scholarship Application**

Download the <u>Scholarship Application Form (PDF fill-in form)</u>. Key in your data on the fill-in form before printing or print out a copy of the form and <u>neatly type</u> in your data. Only the original Scholarship Application Form downloaded from the website will be accepted.

Name:	
Date of Birth:Age:	
Mailing Address:	_
City, State, and Zip Code:	
Phone Number Home: (	
Parent(s) or Guardian:	
Name of High School (presently attending):	
Expected date of graduation:GPA:ACT:Class Rank:	
Name of College/University you plan to attend upon graduation:	
Intended Major:Minor:	
List your activities, honors, awards, services (athletics, debate, dramatics, music, publications, stude government, etc.), and specify leadership positions held:	nt
List your hobbies and extra-curricular activities, in which, you have participated:	

List your volunteer service to school, the community, and/or your church within the last two years:		
What would be the benefits of receiving the Zeta Phi Beta Sorority, Inc. scholarship?		
${f \underline{E}}$	ssay Criteria	
On separate sheet(s) of paper, please respond to one of $(500\text{-word minimum} - double spaced - neatly type of the spaced is a spaced of the $	· · · · · · · · · · · · · · · · · · ·	
Statements (Choose one):		
• If Anyone Would Ever Write My Life's Story	(What legacy do you want to leave?)	
• Lessons in the Key of Life (What advice do yo	u have for future generations?)	
• My Message and My Mission (What advice ha apply that to your life?)	ve you been given that you will carry with you and how do you	
• • • • • •	n in interviews, use of my name and photograph in print, on fit use (e.g. educational or public service purposes) by Zeta	
Signature of Applicant	Date	
Signature/Parent or Guardian	Date	
Please mail your completed packet to:	For questions regarding the application process,	
Zeta Phi Beta Sorority, Inc. Psi Alpha Zeta Chapter	please contact: Dr. Yvette Thomas - Scholarship Chair Email: yvette.n.thomas@gmail.com	
Attn: Scholarship Committee		
P.O. Box 192 Madison, AL 35758	Mrs. Johna Benson-Leslie Email: johna.leslie1920@gmail.com	