



Alpha Kappa Alpha Sorority, Incorporated®

Nu Sigma Omega Chapter

2018-2019
Scholarship Application

For additional information contact:

The Scholarship Committee at
nusigmaomegascholars@gmail.com



Alpha Kappa Alpha Sorority, Inc., founded in 1908 as the first African-American Greek-letter sorority, promotes high scholastic and ethical standards. It soon became America's premiere organization for college-educated women, focusing on academic excellence and community service. The international sorority has grown to over 760 chapters both undergraduate and alumnae. As part of our commitment to higher education, Nu Sigma Omega Chapter annually awards scholarships to deserving high school seniors. We are now accepting applications for our 2018 scholarships. The recipients of this scholarship are selected based on the applicant's demonstrated academic achievement, community service involvement, written communication skills, and letters of recommendation. This scholarship award is \$750.00. In order to qualify for a scholarship, the student must meet the following criteria:

1. Reside in and attend a high school located where an active member of Nu Sigma Omega Chapter of Alpha Kappa Alpha Sorority, Inc. resides (Baldwyn, Corinth, Lee County, Louisville, Okolona, Pontotoc, and Tupelo)
2. Be a high school senior (male or female) who will graduate by May of 2019.
3. Have a minimum 2.8 Cumulative Grade Point Average.
4. Be accepted and anticipate full time enrollment in an accredited undergraduate program in the Fall of 2019.
5. Must have demonstrated leadership in the school and community

The scholarship application for the current school year is attached. We would appreciate your assistance in making this scholarship application available to qualified students. Applications must be post marked no later than Friday, April 5, 2019.

- Application must contain:
 - Completed application
 - Resume
 - Headshot picture
 - High school transcript (uploaded by the school to nusigmaomegascholars@gmail.com) .
 - ACT (composite score) or SAT (total score)
 - Two letters of recommendation (completed by school official, church/community leader)
 - Signed Acceptance Statement
 - Signed Certifications page
 - A 500-word essay on **one** of the topics listed below. The essay must be double-spaced, using 12 point, Times New Roman Font.

**Scholarship
Topic**

(Choose One)

1. Describe how you have demonstrated leadership both in and outside of school.
2. In light of today's political climate of divisiveness and blatant racism against people of color, if you had the opportunity to create your own political platform to bring your school, community, and this country together, what would be your top three platform targets and why?

➤ **A completed application and supporting materials must be submitted by Friday, April 5, 2019. NO EXCEPTIONS!**

Lashanda Garrettt
President, Nu Sigma Omega

Tierany Porter-Mosely
Scholarship Chairman

APPLICATION CHECKLIST*

A completed application and all supporting materials must be postmarked, as one complete package, by Friday, April 5, 2019.
NO EXCEPTIONS!

References and an official high school transcript must be uploaded to nusigmaomegascholars@gmail.com by the April 5, 2019 deadline.
NO EXCEPTIONS!

An application that is missing items will be considered incomplete and will not be considered for an award. **NO EXCEPTIONS!**

Your upload must contain:

- ✓ Completed application with all required signatures and information
- ✓ Resume
- ✓ ACT (composite score) or SAT (total score)
- ✓ A headshot picture
- ✓ Acceptance Statement
- ✓ Certifications page
- ✓ A 500-word essay on one of the topics listed above. The essay must be double-spaced, using 12 point, Times New Roman Font.

Don't forget to:

- Remind your references that their forms or reference letters must be uploaded/mailed by the April 5, 2019 deadline.
- Remind your School Counselor that your transcript must be uploaded by the April 5, 2019 deadline.

*Submitting the application documents via email confirms that you are uploading all the required documents. All official communication regarding the application process will occur via e-mail or by phone. Please ensure that the email address is entered accurately. Failure to receive email communication rests solely with the applicant.

PERSONAL INFORMATION:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Alternate Number: _____

E-mail: _____

Parent/Guardian: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Alternate Number: _____

COLLEGIATE GOALS: List up to four colleges/universities to which you will apply in order of preference.

Accepted?

Name: _____ City/State: _____ Y/N

Name: _____ City/State: _____ Y/N

Name: _____ City/State: _____ Y/N

Name: _____ City/State: _____ Y/N

What will be your major area of study? _____

EMPLOYMENT HISTORY (IF APPLICABLE):

From/To Dates	Company Name	Supervisor	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ACADEMIC HISTORY:

High School: _____ Graduation Date _____

Cumulative Grade Point Average on a 4.0 scale: _____

ACT Composite Score: _____ SAT (Critical Reading & Math) Total Score: _____

LEADERSHIP (SCHOOL, CHURCH, COMMUNITY, OTHER): If additional space is needed, include on resume.

Organization/Activity	Leadership Role/Office Held	Dates Involved
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

COMMUNITY SERVICE ACTIVITIES: If additional space is needed, include on resume.

AWARDS, HONORS, RECOGNITION: Academic, Church, Community, Sports, etc.
If additional space is needed, include on resume.

REFERENCES:

List two references below. References must be a school official or church/community leader. The person submitting your reference cannot be a relative and must submit the recommendation form or letter to nusigmaomegascholars@gmail.com no later than **April 5, 2019**.

Name	Position	Phone
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

What is the date of your high school Awards ceremony?

ACCEPTANCE STATEMENT

Please read and sign:

If I am awarded a scholarship from Alpha Kappa Alpha, Inc., Nu Sigma Omega Chapter, I agree to provide all relevant information as it related to the obtainment of this award. I agree that all documents enclosed in this application are accurate and represent my own personal achievement and none of which is falsified or that of another person. Failure to comply with this agreement will forfeit all awards.

Applicant's Signature

Date

Parent/Guardian's Signature

Date

CERTIFICATIONS

Applicant and parent/guardian: Please indicate that you have read and understand and that the following statements are correct, by initialing each statement below and including your original signatures in the spaces allotted.

_____/_____/_____ I certify that all information provided is correct and complete to the best of my knowledge. I give the Nu Sigma Omega Chapter of Alpha Kappa Alpha Sorority, Inc. permission to verify any information contained in my information package, as necessary. I understand that misrepresentation of any information or the submission of inaccurate or incomplete information will result in disqualification from consideration for a scholarship or forfeiture of any award that I may receive and there is no appeal process.

I certify that the applicant: (please check all that apply)

- is a resident of one of the aforementioned counties.
- attends a high school in the School District.
- is a high school senior graduating in the class of 2019

_____/_____/_____ I understand that if the applicant is awarded a scholarship, the funds will be sent directly to the college/university once the proper verification forms have been completed and returned to the Nu SigmaOmega Chapter of Alpha Kappa Alpha Sorority, Inc.

_____/_____/_____ Notice of Possible Use of Your Name, Image, or Likeness

Please be advised that attending and participating in any event associated with Nu Sigma Omega Chapter of Alpha Kappa Alpha, Sorority, Inc., scholarship may result in the use of your name, image, and/or likeness in printed and electronic material, including but not limited to publication on the World Wide Web, social network sites, in press materials, and in advertising and marketing materials. You hereby specifically release Nu Sigma Omega Chapter of Alpha Kappa Alpha Sorority, Inc. and its agents from any and all claims arising from the use of your name, image, and/or likeness based on any of the uses stated above.

Parent/Guardian's Signature

Date

Applicant's Signature

Date

INSTRUCTIONS FOR REFERENCES

Recommenders can use the attached form or write a letter. Any letters written should be on official letterhead and include the information listed below. If the reference does not have letterhead, please include mailing and email addresses and a contact number.

Failure to supply all information listed will result in applicant receiving a lower score.

- Name and contact information of reference
- Relationship to applicant
- How long reference has known applicant
- Information regarding why applicant should receive the scholarship award

The form or recommendation letter must be submitted to nusigmaomegascholars@gmail.com by **April 5, 2019**.

RECOMMENDATION FORM

Section I – To be completed by Applicant

Name of Applicant _____

Section II – To be completed by a high school, college, church, or community leader who knows the applicant well enough to answer questions about her leadership skills. The person completing this section must not be related to the applicant.

1. How long have you known the applicant? _____
2. In what capacity have you known the applicant? _____
3. Please give your personal appraisal of the applicant:

Category	Excellent	Good	Fair	Poor	Do Not Know
Scholastic achievement					
Community service					
Leadership skills					
Commitment to obtaining a college degree					
Goal setting					
Character and personality					
Initiative and drive					

4. What are the characteristics that make you believe this applicant will be a successful college student?

5. Comment on the applicant's judgment, maturity, morals and values.

Signature _____ Date _____
 Print Name _____ Title _____
 School/Organization _____ City _____ State _____

PLEASE RETURN COMPLETED RECOMMENDATION FORM TO nusigmaomegascholars@gmail.com, or mail to:
Alpha Kappa Alpha Sorority, Inc.
Nu Sigma Omega Chapter
P. O. Box 7238
Tupelo, MS 38801

INSTRUCTIONS FOR REFERENCES

Recommenders can use the attached form or write a letter. Any letters written should be on official letterhead and include the information listed below. If the reference does not have letterhead, please include mailing and email addresses and a contact number.

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