



**ALPHA KAPPA ALPHA SORORITY, INCORPORATED  
BETA PI OMEGA CHAPTER  
AND  
THE IVY FOUNDATION OF LITTLE ROCK**

To: Graduating Senior High School Young Women  
From: Scholarship Committee  
Alpha Kappa Alpha, Sorority, Incorporated  
Beta Pi Omega Chapter and The Ivy Foundation of Little Rock  
Date: December 1, 2017  
Subject: Scholarships ranging from \$1,500 to \$500

Alpha Kappa Alpha Sorority, Incorporated, Beta Pi Omega Chapter and The Ivy Foundation of Little Rock, in keeping with our philosophy of promoting finer womanhood, are awarding a variety of scholarships to graduating high school African-American women who will attend a four-year college or university. The applicant must have:

- a cumulative grade point average of 3.0 (no rounding) or better
- at least 950 on the SAT or 19 on the ACT
- high ethical standards
- outstanding leadership ability
- participation in community and extra-curricular activities
- a need for financial assistance

The \$1,500 scholarship will be awarded based on the following criteria: one to a young woman who has excelled in general academic, aptitude, leadership, and service. The other \$1,500 scholarships will be awarded as follows: one to a young woman who has excelled in the area of math or science and intends to major in either, another to be awarded to a young woman who will attend a Historically Black College or University, the third will be awarded to a young woman who intends to enter into the area of teaching, and the remaining scholarships will be awarded to the applicant with the most leadership and service among the applicants. The \$1,000 and \$500 scholarships are general in nature.

**All chosen finalists MUST attend a mandatory interview session on Saturday, February 17, 2018. In case of inclement weather, all interviews will take place on Saturday, February 24, 2018.** Our scholarship award program is scheduled for **Sunday, April 22, 2018.** **Scholarship finalists MUST attend the program. Applications *must be received or postmarked* by midnight on January 31, 2018.** Please forward all material to:

Alpha Kappa Alpha Sorority, Incorporated  
Beta Pi Omega Chapter  
c/o Mrs. Natalie Rhodes-Warren  
8609 Breakwater Court  
Sherwood, AR 72120-4371

Please contact Mrs. Rhodes-Warren at (501) 835-1319 if you have any questions.

Scholarship Application  
Alpha Kappa Alpha Sorority, Incorporated  
Beta Pi Omega Chapter  
And  
The Ivy Foundation of Little Rock

Name \_\_\_\_\_ High School \_\_\_\_\_  
Address \_\_\_\_\_ Telephone \_\_\_\_\_  
City/State \_\_\_\_\_ Zip Code \_\_\_\_\_  
E-Mail \_\_\_\_\_

Rank in Class \_\_\_\_\_ Grade Point Average \_\_\_\_\_ ACT/SAT Score \_\_\_\_\_

With whom do you live? (List both parents, one parent, grandparent, etc.)  
\_\_\_\_\_

Number of children in home depending on family income \_\_\_\_\_

Please list names and ages:

\_\_\_\_\_  
\_\_\_\_\_

Number of children currently enrolled in an Institution of Higher Learning \_\_\_\_\_

Parents

**Father** \_\_\_\_\_ Father's Annual Income \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Where employed \_\_\_\_\_

Occupation \_\_\_\_\_

**Mother** \_\_\_\_\_ Mother's Annual Income \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Where employed \_\_\_\_\_

Occupation \_\_\_\_\_

Does each parent listed above contribute financially to your support? \_\_\_\_\_

If not, please state what source provides your support \_\_\_\_\_

College Choice

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

Have you been accepted by a college? \_\_\_\_\_ If yes, list the name and location of the school (s).  
\_\_\_\_\_

Intended Major \_\_\_\_\_

Have you been awarded any grants, scholarships or other forms of financial aid? If yes, please list the name and amount of each. \_\_\_\_\_  
\_\_\_\_\_

Why are you applying for this scholarship? \_\_\_\_\_

The following support documents are also required:

- Write a 500 word essay stating your career plans, etc. (12 point font)
- Attach an *official transcript* from your high school that contains a **raised seal, in a sealed envelope**.
- SAT and/or ACT scores
- Submit **two letters** of recommendation from **teachers on letterhead with a signature and contact number(s)**.
- Submit **one letter** of recommendation from a **business, civic, or religious leader in the community on letterhead with a signature and contact number(s)**.
- Attach a recent photo to your application. Paper copy photo will not be accepted.

**NOTE:** If your grandmother, mother, aunt, sister, or legal guardian is an active or inactive member of the Alpha Kappa Alpha Sorority, Incorporated, you are **not** eligible to apply for this scholarship.

Please indicate if any of the following members of your family is a member of Alpha Kappa Alpha Sorority, Incorporated:

\_\_\_\_ Grandmother \_\_\_\_ Mother \_\_\_\_ Aunt \_\_\_\_ Sister \_\_\_\_ Legal Guardian

**THIS APPLICATION MUST BE COMPLETED IN ITS ENTIRETY AND ALL SUPPORTING DOCUMENTS MUST ACCOMPANY THIS APPLICATION IN ORDER TO BE ELIGIBLE FOR THE SCHOLARSHIP.**

- The **deadline** for *submitting* applications, and for the application to be *received or postmarked* **JANUARY 31, 2018, at 12:00 MIDNIGHT.**
- Please be advised that interviews for Scholarship Finalists will be held **February 18, 2018. In case of inclement weather, all interviews will take place on Saturday, February 24, 2018.** Candidates are **REQUIRED** to attend the interview process in order to be considered.
- ***If you are chosen as a finalist, YOUR ATTENDANCE AT THE SCHOLARSHIP PROGRAM ON SUNDAY, APRIL 22, 2018, IS REQUIRED.***

### CERTIFICATION

I certify that the information contained in this application is true and correct to the best of my knowledge. I understand that if I provide inaccurate or false information, doing so may disqualify me from consideration for a scholarship with the Beta Pi Omega Chapter of the Alpha Kappa Alpha Sorority, Incorporated and The Ivy Foundation of Little Rock.

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

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**CHECK SHEET**

NOTE: This document is intended for the applicant to use as a checklist. It is not required for use but suggested, as this document is intended to help ensure that all requirements are met. If all requirements are not determined as met, the packet submitted will not be considered for a scholarship.

Cumulative Grade Point Average of 3.0 or better (no rounding)	_____	_____	_____
<b>19 on the ACT or 950 on the SAT</b>	_____	_____	_____
<b>ACT and/or SAT Scores</b>	_____	_____	_____
<b>Completed application</b>	_____	_____	_____
<b>Autobiography</b>	_____	_____	_____
Official transcript with raised seal	_____	_____	_____
Recent Photo (paper copy photo <u>will not</u> be accepted)	_____	_____	_____
2 letters of recommendation from teachers <b>on letterhead with signatures and contact number(s).</b>	_____	_____	_____
1 letter of recommendation from a business, civic, or religious leader <b>on letterhead with signature and contact number(s).</b>	_____	_____	_____
Receipt by deadline	_____	_____	_____

