



Kappa Alpha Psi Fraternity, Inc. Dublin-Laurens Alumni Chapter 2020-2021 Scholarship Application

The Dublin-Laurens Alumni Chapter awards a scholarship each year to a graduating high school senior who will be attending a two or four-year college or university and has demonstrated a proven track record of academic success and community service. This year, the Chapter will award two (2) scholarships in the amount of \$1000/ea. that will be paid in one installment at the beginning of the recipient's first academic semester.

To apply, applicants must send the attached application (filled out in its entirety) and all required supporting documentation **postmarked no later than Friday, March 27, 2020** to the following address:

Kappa Alpha Psi Fraternity, Inc.
ATTENTION Scholarship Committee Chairman
Dublin-Laurens Alumni Chapter
P. O. Box 4362
Dublin, Ga. 31021

Scholarship awards will be based primarily on academic achievement, community involvement and participation in extra-curricular activities determined exclusively by the Scholarship Chapter of Kappa Alpha Psi Fraternity, Inc. Dublin-Laurens Alumni Chapter.

Eligibility Requirements for Scholarship Award Applicants:

- 2020 graduating high school **male** student attending a high school in Johnson, Laurens, Washington, Wheeler or Wilkerson counties.
- Minimum cumulative GPA of 3.0 on a 4.0 scale (official sealed school transcript required)
- Documented verification of participation in extracurricular activities
- Completion of ACT and/or SAT standard exam (official score)
- Documented hours of community service
- Letter of Acceptance to an accredited four-year university
- Two (2) letters of recommendation

Award recipients will be notified prior to April 18, 2020 and will be presented at the recipient's schools' Honor's Day Program.

Applications not containing any of the following documents will be deemed incomplete and will not be considered: (1) Official sealed school transcript (2) documentation of participation in extra-curricular activities and community service (3) letter of college acceptance and (4) two letters of personal recommendation.

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SCHOOL ACTIVITIES

Please complete this record with information regarding your participation in organizations during high school. List the organization and/or activity and place an X in the column indicating the year(s) of participation.

School Organizations/Activities	9 th	10 th	11 th	12 th

Awards/Honors/Achievements	9 th	10 th	11 th	12 th

Please complete the following record with information regarding your participation in any community-based organizations during your high school years. Specify any positions or offices held. **Also include documentation from the community official documenting the actual number of hours that you volunteered with their organization.**

Community Activities	9 th	10 th	11 th	12 th

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APPLICANT'S STATEMENT

Please describe in 300 words or less why you should be considered for this scholarship award. Please include your personal attributes, unique qualities and future goals. Your statement must be typed (double spaced using a 12-point font) and attached to this application.

REFERENCE LETTERS

Please submit two (2) letters of reference from individuals that have an in-depth knowledge of you. Evaluators of this application are looking for 2-3 concrete reasons why you, the applicant, should be given consideration for this scholarship award. Reference letters must be typed, placed in a sealed envelope by the individual writing the letter and attached to this application.

OFFICIAL HIGH SCHOOL TRANSCRIPT

Please include an official high school transcript through the 2nd quarter of your senior year. The transcript should include your ACT/SAT score(s). The official transcript must be in a sealed envelope and attached to this application.

COLLEGE/UNIVERSITY ACCEPTANCE LETTER

Please include a copy of your official letter of acceptance for the Fall 2020 term from the college/university you plan to attend.

SIGNATURE

By signing below, I HEREBY AFFIRM that the information contained in this application is true and accurate. I also affirm that I intend to be enrolled in an accredited four-year school of higher education as a full-time student in a degree program in the Fall of 2020. I understand that no funds will be received until the Dublin-Laurens Alumni Chapter of Kappa Alpha Psi Fraternity, Inc. receives official notification from my college/university Registrar's Office verifying my Fall 2020 term full-time enrollment status.

Applicant's Signature: _____ Date: _____

Printed Name: _____

Parent/Legal Guardian's Signature: _____ Date: _____
(If applicant is under the age of 18 on the date signed)

Printed Name: _____