The 2020 Gladys A. Turner Scholarship Application

Scholarships will be awarded to local high school seniors residing in Houston County, Georgia.

SCHOLARSHIP CRITERIA

1. GPA of 3.0 or higher
2. Applicant must be entering college as a freshman in the fall of 2020

THE FOLLOWING IS REQUIRED

1. Completed Applicant Information Sheet (attached)
2. One Page, Typed Essay on Current Life Goals
   1. Essay should be double spaced typed in Times New Roman 12-point font with 1-inch margin
3. One Letter of Recommendation from a present or past teacher
4. Copy of SAT and/or ACT scores
5. Official High School Transcript
6. One 2 x 3 Photograph

Items 1-6 must be submitted as a complete package. Incomplete packages will not be considered. All materials submitted with the application, including photographs, become the property of Xi Omega Zeta Chapter of Zeta Phi Beta Sorority, Inc., and may be used for promotional purposes. Submission of an application constitutes your authorization and release.

Scholarship recipient(s) will be notified by email and recognized during the Xi Omega Zeta Finer Womanhood Luncheon on March 21, 2020, in Warner Robins, Georgia. Funds will be disbursed to the student once proof of enrollment at a university/college is submitted and verified.

Complete package must be postmarked by Saturday February 8, 2020.

Mail Application Package To:

Zeta Phi Beta Sorority, Inc.

Xi Omega Zeta Scholarship Committee

PO Box 8156

Warner Robins, Georgia 31095-8156

Applicant Information

***Personal Background Information***

First, Middle, Last Name:

Home Address:

City, State Zip Code:

Telephone:

Email:

Date of Birth:

Parent/ Guardian Name(s):

***Academic Information***

Name of High School:

Cumulative GPA:

Are you a high school senior? Yes No

High School Honors Received:



**Extra-Curricular Activity (includes school and/or work experiences**):

|  |  |
| --- | --- |
| **Description of Activity** | **Leadership Experience** |
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**Community Involvement (Volunteerism):**

|  |  |  |
| --- | --- | --- |
| **Community Involvement Agency:** | **Dates of Involvement:** | **Description of Activity:** |
|  |  |  |
|  |  |  |
|  |  |  |

List the names of the schools you are considering attending:



Intended Major:

**Signature of Applicant:** **Date:**

**Signature of Parent/Guardian:** **Date:**