



Alpha Kappa Alpha Sorority, Incorporated

Omicron Omega Chapter

SCHOLARSHIP ANNOUNCEMENT

Requirements

- ❖ Applicants must plan to attend a four year institution in 2018-2019
- ❖ Applicants must have a minimum GPA of 3.5/4.0 or higher
- ❖ The Transcript must be in a sealed envelope
- ❖ The Transcript must be postmarked by Friday, March 9, 2018
- ❖ Applicants must interview with Scholarship Committee.

APPLICATIONS AVAILABLE FEBRUARY 25, 2018
SEE YOUR GUIDANCE COUNSELOR

TURN A LITTLE TIME INTO A
LOT OF MONEY!

APPLICATION
DEADLINE:
MARCH 12TH
MIDNIGHT





Omicron Omega Chapter
Alpha Kappa Alpha Sorority, Inc
2018
Scholarship Committee

February 25, 2018

To: All High School Counselors

Re: 2018 Scholarship Applications

1. Please give a copy of the application to either:
 - a. Two 2018 Seniors who have achieved a GPA Higher than 3.5 or above
 - b. Two 2018 Seniors who are in need of financial assistance to attend college in the Fall with a GPA higher than 3.5 or above

Sincerely,

Carla L. Flakes

Ms. Carla L. Flakes, Ed.S

Chair Scholarship Committee

Alpha Kappa Alpha Sorority, Incorporated

Omicron Omega Chapter

February 14, 2018

Dear Principal/Counselor

The Scholarship Committee of Alpha Kappa Alpha Sorority, Incorporated, Omicron Omega Chapter is seeking applicants for its scholarships to be awarded for the 2017-2018 academic school year.

Recipients of the scholarships will be determined by considering each applicant's scholastic achievement, leadership ability, community service and school involvement. The Omicron Omega Chapter will award scholarships to deserving students on the basis of financial need who meet the established criteria. Using the guidelines listed below: please nominate two members of the Senior Class of 2018 from your school.

Requirements:

1. Applicants may be a female or male with definite plans to enroll in a four year college or university during the 2018-2019 academic school year.
2. Applicants must have a minimum cumulative grade point average of 3.5 or above on a 4.0 scale in academic courses completed in grades 9-12.
3. Transcript must be mailed in a sealed envelope and postmarked by Monday, March 5, 2018.
4. Applicants must interview with the Scholarship Committee of Alpha Kappa Alpha Sorority, Incorporated, Omicron Omega Chapter.

Application directions::

The completed application packet must be postmarked no later than Monday, March 12, , 2018 at 12:00 Midnight. Packets are to be mailed to::

Ms. Carla L. Flakes, Ed.S, Chair
Scholarship Committee
P.O. Box 728
Fairfield, Alabama 35064

APPLICATION DEADLINE:

March 12, 2018 at 12:00 midnight. This is an absolute deadline for all submittals.

No exceptions will be permitted.

Packets must include the following information and documentation:

- 1. Completed Application**
- 2. Official (sealed) high school transcript including class rank and college entrance examination scores (ACT or SAT)**
- 3. Three letters of recommendations**
- 4. Documentations of financial need (APPLYING FOR NEED-BASED, ACADEMIC REQUIREMENTS MUST BE MET, AND PROVIDECOIES OF FOOD STAMP eligibility, W2 FORM, ETC, AS PROOF OF NEED)**
- 5. Essay**

- **Essay must contain:**

Applicants name, school, essay topic should be typed on each page.

- **The essay should be no more than two doubled spaced pages (8.5 x 11) – minimum of 500 words, using 12 point font, with one inch margins addressing the following topic:**

Theme topic:

How will I apply current knowledge to my future goals in order to fulfill my aspirations?

Please site all referenced used.

When the applicant's packet is received and reviewed, the chairman or member of the scholarship committee will contact the applicant to schedule an interview. The Interview date is TBA- 2018. There will be no make-up date.

Thank you for your efforts in assisting the Omicron Omega Chapter with this worthwhile cause. If you have questions, please contact me at gammapi1984@aol.com.

Sincerely,

Carla L. Flakes, Ed.S, Scholarship Chair

Mrs. Nanette Baldwin, Omicron Omega , President



Alpha Kappa Alpha Sorority, Incorporated

**Omicron Omega Chapter
2018 Scholarship Application**

Date _____

NAME _____ High School _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

Email _____ Telephone _____

DATE OF BIRTH-MONTH _____ DATE _____ YEAR _____ PLACE OF BIRTH _____

PARENTS OR GUARDIAN:

MOTHER _____ ADDRESS _____

OCCUPATION _____

FATHER _____ ADDRESS _____

OCCUPATION _____

GUARDIAN _____ ADDRESS _____

OCCUPATION _____

DEPENDENT CHILDREN IN FAMILY:

NAME	AGE	LIVING AT HOME	ELEMENTARY	HIGH SCHOOL	COLLEGE

CHURCH or COMMUNITY AFFILIATION: _____

Leadership positions held: _____

SCHOOL ACTIVITIES:

A. List past and present membership in school organizations.

Indicate office(s) held.

B. List honors, awards, and scholastic achievements:

CAREER GOAL: _____

WORK EXPERIENCE:

EMPLOYER

DATES OF EMPLOYMENT

_____	_____
_____	_____
_____	_____

COMMUNITY INVOLVEMENT:

HOBBIES:

NAME OF COLLEGE/UNIVERSITY YOU PLAN TO ATTEND (Please indicate whether or not you have been accepted for admittance):

College/University _____ City _____ State _____ Zip Code _____