



Zeta Epsilon Sigma Alumnae Chapter Sigma Gamma Rho Sorority, Inc.

February 8, 2020

Dear Applicant:

Sigma Gamma Rho Sorority, Incorporated was founded on November 12, 1922 on the campus of Butler University in Indianapolis, Indiana. Sigma Gamma Rho Sorority, Inc. was the only one of the four (4) National Pan-Hellenic Council sororities started on a predominantly white college campus. It was chartered by seven (7) school teachers who were determined to create an organization of women who were committed to higher education, dedicated to youth, living by the highest ethical standards, and rendering unselfish service to make a better society.

The Zeta Epsilon Sigma Alumnae Chapter of Sigma Gamma Rho Sorority, Inc. provides scholarships to graduating seniors. The recipient(s) of the scholarships will receive a **One Time** *Only* monetary award of \$500. The money will be payable only upon receipt of a letter from an institution of higher learning, verifying applicant's enrollment.

Applicants are:

- Graduating seniors who plan to attend college in the Fall
- Residents of one (1) of the following counties: Leflore, Sunflower, Bolivar, and Coahoma
- Students who possess a cumulative GPA of 3.0 or higher (weighted 4.0 scale)

The completed form with all documents attached must be forwarded to the Scholarship Committee with a postmark date, no later than Wednesday, April 15, 2020.

Mail completed application to:

Scholarship Committee
Sigma Gamma Rho Sorority, Inc.
Zeta Epsilon Sigma Alumnae Chapter
Post Office Box 1057
Greenwood, MS 38935

Deadline date:

April 15, 2020.

If you have questions regarding this application, please contact Michelle Horn at (662)719-4926 or lynnhorn68@gmail.com, Emma Robinson at (662)719-6424 or ejrobinson020@yahoo.com, or Audrey Smith at (708)829-4398 or audreyk55@yahoo.com, or Mary James at (662) 392-4656 or merryj1922@yahoo.com.

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2020 SCHOLARSHIP APPLICATION SUBMISSION FORM CHECKLIST

Name of Scholarship Applicant: _____

Date Application mailed: _____ / _____ / _____
Month Date Year

In order to be considered for Zeta Epsilon Sigma Alumnae Chapter of Sigma Gamma Rho Sorority, Inc. Scholarship, an applicant **MUST** comply with the listed application procedures and submit all required documentation.

Place a check mark on the line in front of the following items that you are submitting in your application packet:

_____ 1. Application: All three (3) pages of the application form, including signed Scholarship Application Submission Form and signed Scholarship Consent Form.
Do not attach a resume.

_____ 2. Official Transcript (as defined below):

Official high school transcript must include a weighted Cumulative Grade Point Average of at least 3.00 on a 4.00 scale. Transcript must be affixed with the school seal and put in a sealed envelope with the school counselor's signature.

_____ 3. Grading Scale: Pamphlet or notation on the transcript or some other written description of the grading system at the school.

_____ 4. Two (2) Signed Letters of Recommendation: Signed letter from a school official, an employer, church representative, community leader, friend or neighbor.
Do not include relatives.

Only one (1) letter from a school-related reference. Only one (1) letter from a Non-school-related reference. Each letter must be in a sealed envelope with the writer's signature written across the flap of the envelope.

_____ 5. Submit a double spaced, typewritten personal profile (500 words limit) that addresses the following: Personal data, School activities, Skills, Awards and/or Honors, Employment and Community Services: (How has your participation in community service made an impact on your peers, at your school or in your community?)

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Zeta Epsilon Sigma Alumnae Chapter Sigma Gamma Rho Sorority, Inc.

2020 SCHOLARSHIP APPLICATION FORM

Please type or print

Name of Applicant: _____
Last First M.I.

Address: _____
House # Street Apt. #

City State Zip

Home Telephone: _____ Work Telephone: _____

1. Age: _____ Date of Birth: ____/____/____

2. Name of Parent(s) or Guardian(s): _____

3. Name of High School: _____

4. Name of Principal: _____ Telephone No.: _____

5. Name of Counselor: _____ Telephone No.: _____

6. Date of Graduation: _____ Number in Class: _____ Average Grade: _____

7. Name and Address of Colleges to which you have applied:

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

8. Where have you been accepted? _____

9. When do you plan to enroll? _____

10. Two (2) Signed Letters of Recommendation:

(a) School Official, (b) Church Representative, (c) Community Leader, (d) an Employer, or
(e) Friend or Neighbor.

11. Sealed academic transcript of grades from 9th through 1st semester of senior year with grade point average.

12. Personal Profile: (a) Personal Data, (b) School Activities, (c) Skills, (d) Awards and/or Honor, (e) Employment and (f) Community Services: (How has your participation in community service made an impact on your peers, at your school or in your community?)

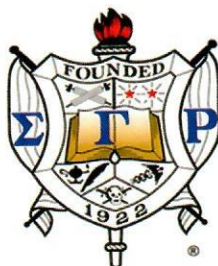
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2020 SCHOLARSHIP APPLICATION FORM

Personal Profile (500 words limit): (a) Personal Data, (b) School Activities, (c) Skills, (d) Awards and/or Honor, (e) Employment and (f) Community Services: (How has your participation in community service made an impact on your peers, at your school or in your community?) ***Do not attach a resume.***
Note: (Use plain bond paper, if additional space is needed.)

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2020 SCHOLARSHIP APPLICATION FORM



SCHOLARSHIP CONSENT FORM

I understand to be eligible to receive Zeta Epsilon Sigma Alumnae Chapter of Sigma Gamma Rho Sorority, Inc. scholarship:

I am a student who will be graduating from a high school in one of the above mentioned counties. I give my consent for Zeta Epsilon Sigma Alumnae Chapter of Sigma Gamma Rho Sorority, Inc. to use information in my application for the purpose of publicizing the scholarship awards in media chosen by the chapter. I certify that the information contained herein is correct to the best of my knowledge.

Applicant's Signature

Date

Parent(s) Signature

Date

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