



Soaring to Greater Heights of Service & Sisterhood

Alpha Kappa Alpha Sorority, Incorporated®

Kappa Eta Omega Chapter

Valdosta, Georgia 31601

2024 SCHOLARSHIP APPLICATION FORM

Name _____ **School** _____

CONTACT INFORMATION:

- Please [Click Here](#) to complete and submit your contact information form.

*****SCHOLARSHIP APPLICATIONS MUST BE SUBMITTED ON TIME*****

Scholarship Application Deadline: **March 25, 2024**

Scholarship Application Packet must be submitted as **ONE Attachment** in a single submission via email on or before **11:08 p.m.** on **March 25, 2024**, to keoscholarship@gmail.com.



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APPLICANTS MUST MEET THE FOLLOWING CRITERIA:

- Graduate must enter a **four-year college or university** by September 1st of each year.
- Indicate an interest in pursuing a **four-year degree on the scholarship application.**
- Grade point average must be **3.0 or higher.**

APPLICANT MUST ENCLOSE THE FOLLOWING WITHIN THE SCHOLARSHIP APPLICATION:

- **SAT and/or ACT** scores as a PDF with the application packet;
- Essay of a **minimum of one page, but not to exceed two pages**, on the following topic:
 - “How will the Alpha Kappa Alpha Sorority Scholarship help me Reach My Educational Goal(s)?”
 - *Please include any challenge(s) to overcome financial needs, if any;*
- Reference letters as a PDF within the application packet from each of the following references:
 - **Educator** (list reference in Section II)
 - **Community Member** (list reference in Section II)
- Enclose **Official High School Transcript as a PDF within the application packet; and,**
- Submit a completed **Scholarship Application Form** (Application is a fillable PDF form).

SELECTION PROCESS:

Committee members of Alpha Kappa Alpha Sorority, Incorporated, Kappa Eta Omega Chapter will select the scholarship recipient for each high school. The committee will base their selection on the essay along with other information provided in the scholarship application.

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SECTION I - DOCUMENT CHECKLIST

Click each box to verify that the information and/or documents are enclosed with your Scholarship Application Packet for electronic submission via email to keoscholarship@gmail.com.

_____ This Checklist page is submitted as [PAGE 1](#) of the Scholarship Application Packet.

The Section II portion of the application is typed in black ink and submitted as [PAGE 2](#) of the Scholarship Application Packet.

_____ An Essay addressing in specific detail the topic provided on the Scholarship Cover Letter is submitted as [PAGE 3](#) and/or [PAGE 3B](#) of the Scholarship Application Packet.

_____ Official High School Transcript attached as [PAGE 4](#) of Scholarship Application Packet.

_____ SAT and/or ACT Official Scores are included with the Scholarship Application Packet as [PAGE 5](#).

Two original letters of reference typed and signed by persons listed in Section II.

_____ The Completed Scholarship Application Packet is submitted as one attached document.

___ Your Email Submission: Subject Line: High School Name---Your Full Name

(Complete Contact Information Form via link.

_____ The Completed Scholarship Application Packet includes all the required documents and is submitted electronically in one attachment and one email submission on or before 11:08 p.m. on March 25, 2024, via email to keoscholarship@gmail.com.



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SECTION II - EDUCATION, ACTIVITIES, & REFERENCES

Name and address of four year institution that you plan to attend in the fall of this year.

List activities and clubs in which you have participated while in high school, include offices and positions (Attach a separate sheet if necessary).

List community organizations and affiliations, include office(s) or positions(s) held (Attach a separate sheet if necessary).

What is your educational goal(s)? What are your future career plans?

List below **TWO** references, **One Educator and One Community Member**, along with their contact information (*Names must match the names on your letters of reference*):

1. _____
Name (Area Code) Phone

Address City State Zip Code

2. _____
Name (Area Code) Phone

Address City State Zip Code

Attach the two reference letters as the last two pages of the scholarship packet.



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SECTION III - ESSAY

SUBMIT AS PAGE 3

Please type below your double spaced ONE to TWO Page Essay.

- **HOW WILL THE ALPHA KAPPA ALPHA SORORITY, INCORPORATED, SCHOLARSHIP HELP ME REACH MY EDUCATIONAL GOAL(S)? *Please include any specific challenge(s) to overcome financial needs, if applicable.***



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Please continue below with your Essay if needed.

SUBMIT AS PAGE 3B