

Alpha Kappa Alpha Sorority, Incorporated

ZETA OMEGA OMEGA CHAPTER

2024 Scholarship Information

The Zeta Omega Omega Chapter of Alpha Kappa Alpha Sorority, Scholarship Committee will award scholarships to African American students from high schools in Pierce County and other selected areas in King, Kitsap, and Thurston Counties. The scholarships will range from five hundred to four thousand dollars (\$500 to \$4,000).

Access application at zooaka.org

(Click on Scholarship Application)

The completed application must be emailed to <u>cocnn@aol.com</u>.

Please **type all portions** of the application except where signatures are required. Exception, typed signatures are allowed in the "Photo Contest" section. If the application is not typed, it may cause the applicant to be ineligible.

To be eligible for consideration, applicants must submit all required documents to the email address (<u>cocnn@aol.com</u>) no later than <u>March 11, 2024.</u>

If applicant wishes to share copies of awards or other pertinent items with the committee, please mail them to:

Alpha Kappa Alpha Sorority, Incorporated Zeta Omega Omega Chapter Scholarship Committee P.O. Box 11072 Tacoma, WA 98411-1072

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Alpha Kappa Alpha Scholarship - 2024

QUALIFICATIONS

Each applicant must be:

- 1. An African American student.
- 2. A citizen of the United States.
- 3. Graduating high-school senior this current year, with an earned G.P.A. of 2.7 or higher.
- 4. Planning to attend an accredited university, college, or technical institution.

REQUIREMENTS

Each applicant must email to <u>cocnn@aol.com</u> the items below by Monday, March 11, 2024:

- 1. In the Application for Scholarship Award section: school activities, community activities, organizations, awards certificates or special recognition, future and educational/career goals.
- 2. Three (3) letters of recommendation from teachers, school counselors/administrators, employers, other adults in the community (exclusive of family members).
- 3. A copy of your **final transcript.**

EVALUATION CRITERIA

Each applicant is evaluated on:

- 1. Quality of transcript
- 2. Degree of involvement in school activities
- 3. Extent of involvement in community activities
- 4. Quality of the essay
- 5. Content of letters of recommendation

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APPLICATION FOR SCHOLARSHIP AWARD

Name				Birth Date /			
	First	Middle	Last				
Ethnicity		Male	_Female	U. S. Citizen: YesNo			
Address		City_		StateZip			
Phone: Home	Cell	Cell		E-mail Address			
Father/Guardian			Mother/Guardian				
Phone:			Phone:				
Number of other siblings presently attending college/university:							
High School	G	Graduation Date					
Attending Colle		Area of study					

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You may use additional paper to complete the items below.

1. List school activities in which you have been involved.

2. List your involvement with community activities/organizations.

- 3. List awards, certificates, and special recognition you received for accomplishments.
- 4. Briefly discuss your educational and career goals.

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Applicant Essay

Compose a typed essay of no less than 500 words on the following topic:

Financial knowledge is essential to understand how the monetary system shapes society. What are some practices that would encourage African American youth to develop a mindset for saving, investing, and entrepreneurship?

I	pledge that all the information I	sent as designated is accurate
±	prease that an the information i	beilt ub debigliated ib debulate.

Photograph Consent Form

Members of Zeta Omega Omega Chapter of the Alpha Kappa Alpha Sorority, Incorporated request permission for the scholarship applicant **to email us a copy of a graduation photo or other appropriate one** so that we can extend congratulations on our website; feature it in our video-program presentation for a fundraising event, and share it in our *Ivy Leaf* magazine to highlight the caliber of students who receive our scholarship awards.

All typed signatures attest as official signatures of the student, parent, or guardian.

Student Name				Date			
	First	Middle	Last				
Parent/Guardian				Date			
	First	Middle	Last				
Applicant Signature Date							
In gratitude: On behalf of the members of Zeta Omega Omega Chapter of the Alpha Kappa							

On behalf of the members of Zeta Omega Omega Chapter of the Alpha Kappa Alpha Sorority, Incorporated, the Scholarship Committee appreciates you for participating in the application process.