**Phi Beta Sigma Fraternity Inc.,**

 **Theta Theta Sigma Chapter**

**2021 Annual Scholarship**

**Application**

Scholarship Guidelines:

* Graduating seniors with a record of volunteerism in the community in non-school sponsored activities and participation in extracurricular school activities.
* Scholarships are available to graduating high school seniors entering college in the summer of 2021.
* Scholarships amounts vary from $500 to $1,000
* Scholarships are paid directly to the school.
* Applicants must complete all areas of the application.
* Submit three (3) letters of recommendation:
	+ One from high school faculty
	+ One from Community leader
	+ One from a friend
* Submit a one-page biography and please be prepared to submit a photo upon request, to be used in scholarship program if selected.
* Official school Transcript.
* Applicants must have a minimum GPA of 2.5 or higher.
* Applicants must have the endorsement of their Guidance Counselor on their application attesting they are a qualified for this scholarship program.
* Recipients have until August 14, 2021 to provide proof of full time enrolled into any accredited university, nursing school, business school; vocational or technical school. If proof of enrollment is not received by this date, the scholarship will be forfeited.

***Theta Theta Sigma strongly suggests that each high school present this opportunity to the strongest applicants that match this program’s guidelines.*** Application deadline is ***May 15, 2021***; late applications are not accepted.

Mail completed scholarship package to: Theta Theta Sigma Chapter

*(That includes application that are signoff by Guidance Department, essay,* c/ o Director of Education

*School resume and school transcript.)* P.O. Box 31222

 El Paso, TX 79931-0222

The applications will be reviewed and recipients selected by a committee consisting of members from Theta Theta Sigma Chapter of Phi Beta Sigma Fraternity Inc. The scholarships winners will be notified on May 29, 2021.

Please submit any questions to **TTSEd1982@gmail.com**

**Scholarship APPLICATION 2021**

|  |
| --- |
|   Ensure your answers are legible |
| 1. | Last Name: | First Name: |
| 2. | Mailing AddressStreet: City: State: Zip:  |
| 3. | Telephone Number: (C)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (H)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: |
| 4. | Date of Birth: Month Day Year Gender:  |
| 5. | Cumulative Grade Point Average (GPA): \_\_\_\_\_\_\_\_\_\_  |
| 6. | Attach school transcript is (required)  |
| 7. | Name and location of High School attending:  |
| 8. | Attached high school resume. |
|   9.  | College you will attend:  |
| 10. | *Degree Pursuit:* |
| 11. | Any family a member of Phi Beta Sigma Fraternity Inc.? Yes\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_If your answer is ‘yes’ answer question 12: blocks A, B, C below. If your answer is ‘no’ go to question 13.) |
| 12. | A.  | Full name: |
| B. | Current Chapter: | C. | Member number: |
| 13.  | Name & address of parent(s) or legal guardian(s): **(Include address if different from your own listed in Question two.)** Name(s) :Street: City: State: Zip:Home phone of parents or legal guardians (c)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (H)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14. | Type an essay (500 to 525 words) in MLA format answering the question: A persuasive essay paper using a five-paragraph structure. How did COVID-19 affect your studies this past year school year?  |

Dear Recommendation Contributor:

Thank you for taking the time with this applicant apply for an academic scholarship form Phi Beta Sigma Fraternity, Inc., Theta Theta Sigma Chapter

In writing a letter of recommendation for the supplicant, please consider the applicant’s ability to complete proposed program of study and assigned responsibilities by specifically addressing and evaluating the following areas: Character, intellectual promise, motivation, leadership, integrity, ability to get along with others, and overall personal performance. Please limit your comments to one page.

Sincerely,

//Original Signed//

Scholarship Committee Chairman

**STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR**

I hereby affirm that this application meets the criteria set forth by this scholarship application.

Name of Guidance Counselor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact information (email and phone):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Guidance Counselor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Guidance Counselor statement**

### STATEMENT OF ACCURACY FOR STUDENTS

**Checklist**

\_\_\_ Application

\_\_\_ Essay

\_\_\_ School Resume

\_\_\_ Guidance Counselor signature

\_\_\_ Official School Transcript

\_\_\_ Three (3) letters of recommendation

\_\_\_ One-page biography

\_\_\_ Applicant Signature

\_\_\_ Parent/Guardian Signature

**MAIL COMPLETE APPLICATION PACKAGE TO:**

**Theta Theta Sigma Chapter**

**c/o Director of Education**

**P.O. Box 31222**

**El Paso, TX 79931-0222**

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the Theta Theta Sigma Scholarship Program. (winner may waive photo due to unusual or compelling circumstances)

I hereby understand that if chosen as a scholarship winner, according to Theta Theta Sigma Scholarship policy, I must be present at any potential award ceremony or reception to receive my scholarship award.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

**Signature of scholarship applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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