

AHEPA CHAPTER #63 SCHOLARSHIP GUIDELINES

1. Applicant must be an Ahepan, or the son or daughter of a member of the Ahepa Chapter #63. Said Ahepan must be a member for at least one year and in "good standing".
2. The following criteria shall be considered in awarding a scholarship:
 - a. Academic excellence
 - b. Financial need
 - c. Civic, sports and other extra curricular activities
 - d. Membership in the Ahepa, Daughters of Penelope, Sons of Pericles or Maids of Athena.
3. Applicant must be a full time student enrolled in undergraduate studies.
4. Applicant must have been accepted for admission to an accredited college or university for the current year.
5. Money shall be used for tuition, books, lab fees or other school related expenses.

ORDER OF AHEPA
GOODFRIENDSHIP CHAPTER #63
3142 Ridgewood Road
Akron, Ohio 44313

LOCAL
SCHOLARSHIP
APPLICATION

HINTS FOR FILLING OUT THIS APPLICATION

1. Answer all questions. Use N/A if any question is not applicable.
2. Type if possible. If not, ~~print~~ or write neatly in ink.
3. If spaces provided aren't sufficient, please use back or attach separate sheets.
4. In the past many groups have made comments about the favorable impression of many neat and grammatically correct applications and the negative impression of an application not meeting such standards. Remember that most of the committees do not interview candidates. You are judged by what you put on this application.
5. Scholarship selections are made through the middle of May. If there are any significant changes, please update this form through the guidance office.
6. Scholarship will be forwarded directly to the school you will be attending.
7. Mail application to Office of President, address above.
8. This scholarship is based on academic excellence. Need is not a factor.

DEADLINE:
May 1st.

APPLICATION NO. _____ FOR SCHOLARSHIP AWARD

(Please type or print in ink)

Name _____ Phone Number _____
(Last First M.I.)

Home Address _____

Age _____

Parent, Guardian or Spouse _____

Address _____

Phone Number _____

_____ I agree to allow the selection committee to see an official grade transcript.

_____ Date of Application

_____ Signature of Applicant

I have read the following scholarship application and certify that the information provided is correct.

_____ Signature of Parent of Guardian

APPLICATION NO. _____ FOR SCHOLARSHIP (Part 2)

Cumulative Grade Point Average _____ (To be completed by
your counselor)

Counselor Signature

Class Rank _____ (To be completed by
your counselor)

Counselor Signature

Today's Date _____

Type of training and/or education for which this scholarship will
be used. (Be specific.) _____

What College, university, or school do you plan to attend? For
how long? _____

Have you been accepted by this school? _____

If not, please explain. _____

Make a brief statement discussing your post high school plans,
reasons why you have chosen your particular field, and why you
think you will be a success. _____

Briefly discuss your reasons for applying for this scholarship
award. _____

List work experience along with dates employed (month/year).

List volunteer work you have done along with dates (month/year).

List training or education you have taken outside of high school and for what length of time (music, art, dance, etc.).

List school activities (sports, clubs, band, organizations, etc.) to which you have belonged, the years you have belonged and the offices you have held, if any.

Honors you have received. (In or outside of school)

List schools you have attended and grade level(s) for each.

Are you in a vocational program? _____ If yes, which one?

In which township or city do you reside? _____