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Zeta Phi Beta Sorority, Inc.

Epsilon Xi Zeta Chapter

P.O. Box 7432

Trenton, NJ 08628

[www.epsilonxizeta.org](http://www.epsilonxizeta.org)

# College SCHOLARSHIP APPLICATION

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name | | | | |  | | | | | | | | | | First | | | |  | | | | | | | | | M.I. | |  | Date | |  | | |
| Street Address | | | | |  | | | | | | | | | | | | | | | | | | | | | | | Apartment/Unit # | | |  | | | | | |
| City | | | | |  | | | | | | | | | State | | | | |  | | | | | | | | ZIP | |  | | | | | |
| Home Phone | | | | |  | | | | | | | | | E-mail Address | | | | |  | | | | | | | | | | | | | | | |
| Cell Phone | | | | |  | | | | | | | Date of Birth/Age | | | | | | |  | | | | | | Anticipated Graduation Date | | | | | | |  | | | | |
| Current College | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Parent/Guardian Name(s) | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| Address | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Parent/Guardian Name(s) Occupation | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
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| Education | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| College | | | | |  | | | | | | | | | | | Address | | |  | | | | | | | | | | | | | | | | | | |
| From | | | | |  | To |  | | | Did you graduate? | | | | | | | YES | | | NO | | | Degree | | |  | | | | | | | | | | | |
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| Work Experience | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company 1 | | |  | | | | | | | | | | | | | | | Phone | | | | ( ) | | | | | | | | | | | |
| Address | |  | | | | | | | | | | | | | | | | Job Title | | | | | |  | | | | | | | | | |
| From |  | | | To | | | |  | | | Responsibilities | |  | | | | | | | | | | | | | | | | | | | | |
| Company 2 | | |  | | | | | | | | | | | | | | | Phone | | | | ( ) | | | | | | | | | | | |
| Address | |  | | | | | | | | | | | | | | | | Job Title | | | | | |  | | | | | | | | | |
| From |  | | | To | | | |  | | | Responsibilities | |  | | | | | | | | | | | | | | | | | | | | |
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| ACADEMIC AND COMMUNITY ACTIVITIES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Organization | | | | |  | | | | | | | | | | | Position | | |  | | | | | | | | | | | | | | | | | |
| From | | | | |  | To |  | | | Describe Organization | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Organization | | | | |  | | | | | | | | | | | Position | | |  | | | | | | | | | | | | | | | | | |
| From | | | | |  | To |  | | | Describe Organization | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Organization | | | | |  | | | | | | | | | | | Position | | |  | | | | | | | | | | | | | | | | | |
| From | | | | |  | To |  | | | Describe Organization | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| honors and awards received | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Organization | | | | |  | | | | | | | | | | | Honor/Award | | |  | | | | | | | | | | | | | | | | | |
| Organization | | | | |  | | | | | | | | | | | Honor/Award | | |  | | | | | | | | | | | | | | | | | |
| Organization | | | | |  | | | | | | | | | | | Honor/Award | | |  | | | | | | | | | | | | | | | | | |
| Organization | | | | |  | | | | | | | | | | | Honor/Award | | |  | | | | | | | | | | | | | | | | | |
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| LIST Source(s) and amount(s) of other financial aid you expect to apply and/or to receive | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Organization | | | | |  | | | | | | | | | | | Amount Expected | | |  | | | | | | | | | | | | | | | | | |
| Organization | | | | |  | | | | | | | | | | | Amount Expected | | |  | | | | | | | | | | | | | | | | | |
| Organization | | | | |  | | | | | | | | | | | Amount Expected | | |  | | | | | | | | | | | | | | | | | |
| Organization | | | | |  | | | | | | | | | | | Amount Expected | | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **FIELD OF STUDY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Intended Major | | | | |  | | | | | | | | | | | Intended Minor | | |  | | | | | | | | | | | | | | | | | |
| If undecided, what field of study interests you most? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| References | | | | | | | | | |
| Please list three (3) professional references who will write confidentially about your character and/or financial need. **These letters must accompany this application. Your application will be considered incomplete if all three are not attached. One (1) must be from an advisor or professor and the other two (2) must be from work, church or community affiliation.** | | | | | | | | | |
| Full Name |  | Relationship | | |  | | | | |
| Organization |  | Phone | ( ) | | | | | | |
| Address |  | | | | | | | | |
| Full Name |  | Relationship | | | |  | | | |
| Organization |  | Phone | | ( ) | | | | | |
| Address |  | | | | | | | | |
| Full Name |  | Relationship | | | |  | | | |
| Organization |  | Phone | | ( ) | | | | | |
| Address |  | | | | | | | | |
| Personal Statement/Essay | | | | | | | | |
| In 100 - 200 words, explain why you should be awarded this scholarship and the benefits on a short-term and long-term basis. This must be neatly typed and doubled spaced on a separate sheet. | | | | | | | | |
| Disclaimer and Signature | | | | | | | | |
| I certify that my answers are true and complete to the best of my knowledge. If this application leads to me being selected for a scholarship, I understand that false or misleading information in my application or interview may result in the retraction of the scholarship. I also understand that I will adhere to the requirements and procedures required by Zeta Phi Beta Sorority, Inc. Epsilon Xi Zeta Chapter, otherwise any awards can be delayed or revoked. I agree to follow the guidelines and criteria as stipulated by Zeta Phi Beta Sorority, Inc. Epsilon Xi Zeta Chapter or I will forfeit any and all scholarship funds. | | | | | | | | |
| Applicant Signature |  | | | | | | Date |  |
| Parent/Guardian Signature (optional) |  | | | | | | Date |  |

# Applications must be Received by March 15, 2020.

**Please return the completed application along with supplemental materials to**:

Zeta Phi Beta Sorority, Inc.

Epsilon Xi Zeta Chapter

Attn: Erika Lively

Scholarship Committee Chairperson

P.O. Box 7432

Trenton, NJ 08628

# Criteria for College Scholarship Application

1. Applicant must be a resident of Mercer County and attends an accredited 4-year college/university or be at the recommendation of an active and financial member of Zeta Phi Beta Sorority, Inc. Epsilon Xi Zeta Chapter.
2. Applicant must possess a 2.5 or higher cumulative grade point average (GPA) and semester GPA of 2.5 or higher. Applicant must produce an official transcript from their current college/university.
3. Applicant must submit three letters of recommendation as noted on the application. (**Refer to the section entitled “References” for additional information**).
4. Each scholarship will be awarded on a year to year basis.

(**Please note that scholarship recipients must supply proof of matriculation yearly and send transcript of grades each semester).**

1. Any application received after March 15, 2020 **will not be considered.** Official transcripts, personal statement, and letters of recommendation must accompany the application. **Incomplete and hand delivered applications will not be considered.**
2. Application must be mailed (hand delivered applications will not be accepted) to:

Zeta Phi Beta Sorority, Inc.

Epsilon Xi Zeta Chapter

Attn: Erika Lively

Scholarship Committee Chairperson

P.O. Box 7432

Trenton, NJ 08628

1. Applicant will be notified of interview and selection decision during the month of April.
2. Scholarship recipient must agree to submit Bursar’s receipt and official transcript on or before August 31st for the Fall semester and January 31st for the Spring Semester to the Scholarship committee of Zeta Phi Beta Sorority Inc. Epsilon Xi Zeta Chapter.
3. After registration has been completed at the college/university **AND** once Zeta Phi Beta Sorority, Inc. Epsilon Xi Zeta receives a copy of the Bursar's receipt or a letter from college on letterhead confirming enrollment status from official college representative, the scholarship will be given directly to the recipient.  It is the responsibility of the recipient to provide Epsilon Xi Zeta Chapter with the necessary and acceptable documents.
4. If selected the recipient or a representative must be present at the Erma Jean Nicholson Memorial Awards Tea, which will be held during the month of May.
5. **Applicant must sign and date the application and complete in its entirety.**