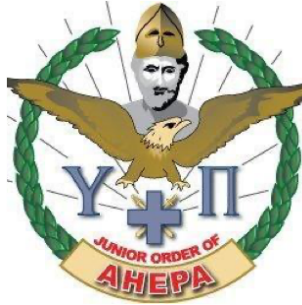


AHEPA FAMILY



CAPITAL DISTRICT #3

COLLEGE SCHOLARSHIP APPLICATION

ACADEMIC YEAR 2023

WASHINGTON DC • VIRGINIA • MARYLAND • NORTH CAROLINA • WEST VIRGINIA



This entire application package becomes the property of the Scholarship Foundation and will not be returned

Dear Applicant:

PLEASE THOROUGHLY READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING THIS APPLICATION.

To be eligible for this Scholarship you **MUST**:

- **Be a full time** student at an accredited institution of learning.
- **Be a child** of an AHEPA or of a Daughter of Penelope member; your sponsor must be in good standing for two consecutive years prior to the year of application. **OR**
- **Be a member** of AHEPA, Daughters of Penelope, Sons of Pericles, or Maids of Athena in good standing for two consecutive years prior to the year of application.
- Have a **cumulative minimum GPA of 3.0**.
- Be graduating High School, or the 1st- or 2nd-year of College, University or Trade School. College seniors, at the time of application, and graduate students are not eligible for District 3 scholarships.
- The Chapter which sponsors you or your parent(s) **must also be in good standing**. This means the Chapter [whose president, vice-president or secretary who e-signs this application] must have paid District and National per capita dues by 12/31/2022.

Applications will now be accepted only via email.

Please ensure that all necessary documents below **are included** with your application and are appropriately e-signed as indicated in the templates.

If these are not present your application will be disqualified.

- Transcripts (See below, item 9, if your school does not have GPA or traditional grading).
Transcripts must be emailed from the Registrar or High School directly to the District 3 Scholarship Committee at the email below.
- Copies of Certificates (if applicable ie. Greek Language, Extra Curricular Activities, Special Awards)
- Written Essay on topic noted below
- Send us your best selfie
- Make sure all required signatures are present: applicant, his/her sponsor [parent if needed], sponsoring chapter's President and Vice President, or Secretary.

Your application must be **emailed to "scholarship@district3ahepa.org"** no later than, **March 31, 2023**

IF YOU HAVE ANY QUESTIONS DO NOT HESITATE TO EMAIL THE SCHOLARSHIP COMMITTEE

All winners will be announced at the 2023 District 3 Convention.

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the two (2) years prior to their death, of either the **ORDER of AHEPA** or the **DAUGHTERS of PENELOPE** in District #3.

C. ___I am a member in good standing of the **ORDER of AHEPA, DAUGHTERS of PENELOPE, SONS of PERICLES, or MAIDS of ATHENA**, with at least two (2) years of membership, prior to the year of application.

9. **CREDENTIALS REQUIRED:** Please attach to this application the following items:

- **If you are a HIGH SCHOOL SENIOR, graduating from High School in 2023:** High School Transcript, Class Rank, Grade Point Average.
- **If you are a COLLEGE UNDERGRADUATE, currently in 1st or 2nd year of College or University or Trade School:** College/University Transcript and Grade Point Average. (3rd and 4th year undergraduates may apply to AHEPA National)

If your school does not have GPAs, Ranks, or traditional grading, please provide a letter from a school administrator (guidance counselor, academic advisor, etc.) stating this. The administrator should provide a “mock GPA” if possible.

10. A **typed** list of all honors, awards, achievements, extracurricular activities, Dean's List, honor societies membership you have received. You may list all clubs and organizations you are a member of as well.

11. A **typed** list of employment history to include part and/or full time employment.

12. A **typed** essay [see prompt below]. PLEASE NOTE: The essay will consist of 750 to 1,000 words, in double-spaced lines, with one inch margins, in 12 point Times New Roman font. **To avoid any partiality by essay readers, please do not put any identifying items in the essay such as your name, city, state, chapter number / membership.**

Having this information in the heading or within the essay will disqualify your application. FAILURE TO ADDRESS THE ESSAY PROMPT WILL DISQUALIFY THE APPLICATION.

Please include a **TITLE** heading the essay and check your spelling/grammar.

ESSAY PROMPT (TOPIC):

"Considering this is the 100 Year Anniversary of AHEPA, how do you see the future of AHEPA & Hellenism maturing over the next 100 Years?"

13. **Please e-sign below.** Please include your parent's [or your] AHEPA or DAUGHTERS of PENELOPE, Sons, or Maids ID number and name.

14. All Winners (*if not currently a member of the AHEPA Family*) will receive a one (1) year membership to the organization of their choice. Which organization would you like to join? _____

By signing below, I verify that everything I have submitted is true to the best of my knowledge and belief. I do understand that if the scholarship committee finds any information in this application falsified, my candidacy for this scholarship will be forfeited. I understand that I must contact the District Scholarship Committee by email should I have any questions in regards with my application.

STUDENT SIGNATURE DATE

PARENT/GUARDIAN SIGNATURE (if student is under 18) DATE
OTHER CHAPTER MEMBER SIGNATURE (IF DECEASED)

Type below the NAME of SPONSORING PARENT and his/her **AHEPA** or **Daughters of Penelope ID #** as well as the **name** and **number** of the parent's sponsoring **AHEPA** or **Daughters of Penelope Chapter**.

NAME OF PARENT MEMBER ID #

SPONSORING CHAPTER OF WHICH HE/SHE IS MEMBER

TO BE COMPLETED by the SPONSORING AHEPA, DAUGHTERS of PENELOPE, SONS or MAIDS CHAPTER, which is in good standing with DISTRICT #3 and National AHEPA.

Our Chapter hereby sponsors the application of:

NAME OF APPLICANT: _____

This application appears to meet all eligibility criteria, and we hereby request for it to be considered for the District Scholarship. We verify that this applicant - or his/her parent - is a member in **good standing** at the time of the application and has been our member for at least two (2) consecutive years [prior to the current year].

CHAPTER PRESIDENT

CHAPTER VICE PRESIDENT or SECRETARY

PRINT NAME

PRINT NAME

SIGNATURE

SIGNATURE

NAME OF CHAPTER & NUMBER

NAME OF CHAPTER & NUMBER

EMAIL

EMAIL

DATE

DATE

APPLICANT CHECKLIST

This is for your own use; you do not need to submit this. If you can successfully check-off everything in this list, your application will be acceptable for review.

- If you are applying for a scholarship, do you have a GPA (Unweighted) of at least 3.0?
- Do you have academic transcripts from school submitted via e-mail directly to **scholarship@district3ahepa.org**?
- Did you indicate which AHEPA Family organization you wish to join?
- Have you provided a typed list of awards, honors, accomplishments (if applicable)?
- Have you provided your work history (if applicable)?
- Have you attached your essay?
- Have you signed the application?
- Has your parent signed the application as sponsor?
- Did you provide your parent's AHEPA/DOP ID or your AHEPA/DOP ID?
- Do you have signatures of your parent's [or your] AHEPA/DOP sponsoring Chapter's Pres/VP/Secretary?
- Have you provided a photo?
- Have you double checked that you filled out each question in the entire application?

**** Plagiarism - Presenting someone else's work or ideas as your own, with or without their consent, by incorporating it into your work without full acknowledgement. If plagiarism is detected, your application will be disqualified.***

***** Essay will be evaluated on topic provided in the following parts: Content-Grammar-Introduction-Body- and Conclusion***

******Please note that students, who have previously been awarded at least two (2) district scholarships may be displaced by another student (with less than 2 district scholarship awards) with a similar ranking in years that the scholarship corpus cannot cover all qualified candidates.***