Alpha Kappa Alpha Sorority, Inc.® Psi Xi Omega Chapter P.O. Box 1602 Alabaster, AL 35007 PXOshelbyscholarship@gmail.com

The members of the Psi Xi Omega Chapter of Alpha Kappa Alpha Sorority, Inc. are pleased to announce the availability of two \$1,000 scholarships for the fall of 2018 academic year.

To qualify, the applicant must:

Be an African-American female graduating in 2018 from a high school in Shelby County, AL Possess a cumulative GPA of **3.0** or better on a 4.0 scale Be attending an accredited 4-year college or university in the fall of 2018 (proof of enrollment will be required before scholarship funds are issued)

All completed applications must include:

An official high school transcript

Two letters of recommendation from:

1- A teacher, counselor, administrator, or other school official

1- A community member, civic, or religious leader

An essay (typed, double-spaced, 12pt. font) on the following topic: (2 pages max)

Pick an experience from your own life and explain how it has influenced your development.

Please type, or print legibly, and complete the attached application. Selection is based on grade point average, academic potential, essay content, school and community involvement, and references. Applications must be <u>received</u> by April 6, 2018 via USPS Standard Mail.

Please, **no certified mail with return receipt request**. Late or incomplete packets will not be considered. Please forward all completed application packets to:

Scholarship Committee Psi Xi Omega Chapter – AKA Attn: Dianna Minor P.O. Box 1602 Alabaster, AL 35007

About Alpha Kappa Alpha.....

Alpha Kappa Alpha Sorority, Incorporated was founded on January 15, 1908 on the campus of Howard University in Washington, DC. Alpha Kappa Alpha is the first Greek-letter sorority established and incorporated by African American college women.

Since its founding over a century ago, Alpha Kappa Alpha's mission has been to cultivate and encourage high scholastic and ethical standards, to promote unity and friendship among college women, to study and help alleviate problems concerning girls and women in order to improve their social stature, to maintain a progressive interest in college life, and to be of "Service to All Mankind."

For more information about Alpha Kappa Alpha Sorority, Incorporated please visit <u>www.aka1908.com</u>.

About Psi Xi Omega Chapter...

Psi Xi Omega was chartered on November 26, 2011 and serves the entire Shelby County area. As women of Alpha Kappa Alpha Sorority, Incorporated, we strive to promote service to all mankind and to shine a light of hope on humanity. Moreover, we strive to let our beacons of light shine brighter and brighter each year with love, compassion, and respect for others. For more information about the Psi Xi Omega Chapter please visit <u>www.pxoaka.org.</u>



Scholarship Application

Personal & Educational Da	ita		
Last Name	First Name, MI		Email
Permanent Address:			Primary Phone #:
			DOB:
Name(s) of Parent/Guardian			
# of Siblings Who Reside in I	Household	- Are You a F Yes	First-Generation College Student?
Current High School Name//	Address:	School Cou	inselor's Name/Ph #:
Date/Time of Awards Progra	m	Date//Loca	tion of Graduation
Cumulative GPA: Ran	k:	ACT:	SAT:
College or University You Pla (include city & state)	nn to Attend:	Have You E	Been Accepted? Yes No

Extracurricular Involvement*

Activity	Dates of Involvement	Leadership Position Held	

Community Service Activities*

Event or Service Location	Responsibilities	Hours Completed

Work Experience*

Place of Employment	Position / Job Duties	Dates of Employment	

Honors & Awards (grades 9-12)*

Description	Year	Description	Year

CERTIFICATION STATEMENT

I hereby agree to hold harmless, and release from liability, the Psi Xi Omega Chapter of Alpha Kappa Alpha Sorority, Inc., or any representative thereof, for any action or claim. I hereby agree to comply with all requirements of the application process as set forth by the Psi Xi Omega Chapter. All of the information on this application is true to the best of my knowledge. If asked to do so, I agree to provide proof of the required information that I have provided on this application. I realize that if I do not supply proof when asked, I may be disqualified as an applicant for this scholarship.

Signature of Applicant	Date
Signature of Parent/Guardian	Date

Allow Street