

Applicant Name _____
High School _____

*Alpha Kappa Chapter
Tri Kappa*

SPRING 2020
APPLICATION FOR COLLEGE SCHOLARSHIP
(The applicant must complete this application)

Completed applications will be picked up at High School on April 17, 2020

I. GENERAL RULES GOVERNING SCHOLARSHIPS:

1. Applicant must show evidence of academic competency (3.0 GPA unweighted).
2. Applicant must show evidence of financial need.
3. Applicant must reside in Clark County, Indiana and be a graduate of Clarksville High School, Jeffersonville High School or Providence High School.
4. The applicant's financial situation will be weighted along with academics, school and extra-curricular activities, work experience, and future vocational plans.
5. Applicant's selected college must be an accredited four-year college located in the state of Indiana. University of Louisville and Bellarmine are also accepted.
6. Scholarship is an outright grant for tuition only.
7. You will be asked to provide your student identification number of the college of your choice, if you are selected as Scholarship Recipient.
8. The sorority will deposit the scholarship money in the Office of Student Financial Aid at the Recipient's selected college.
9. Final selection may be based upon a personal interview, if necessary.

NOTE: Application must be returned to your High School Counseling and Guidance office no later than April 16, 2020.

COUNSELORS: *Please attach a copy of the student's transcript including college aptitude test scores (SAT or ACT) and class rank. Please complete and sign the Counselor area on last page of application*

II. APPLICANT'S PERSONAL DATA

1. Name: _____

2. Birth Date: _____

3. Telephone Number: _____

4. Address: _____

(Must be located in Clark County Indiana to qualify for this scholarship.)

5. Work Experience:

6. Vocational Goal: _____

7. High School Activities, Offices Held, Community and Church Participation, Honors Received and Special Interests:

8. Please attach a typed essay of 200 words or less detailing personal goals and career expectations.

III. FAMILY INFORMATION

Parents: Father ___ Deceased ___ Stepfather ___ Deceased ___
Mother ___ Deceased ___ Stepmother ___ Deceased ___

Father/Guardian: _____

Occupation: _____

Address if other than student's home address: _____

Employer: _____

Years with Firm: _____ Income: _____

Mother/ Guardian: _____

Occupation: _____

Address if other than student's home address: _____

Employer: _____

Years with firm: _____ Income: _____

EDUCATIONAL BACKGROUND OF FAMILY:

Write the highest level of education attained.

Indicate the age of brothers and sisters, if they live at home and/or attend college.

Father: _____

Mother: _____

	Name	Age	At Home	In College
Brother/Sister	_____	_____	_____	_____
Brother/Sister	_____	_____	_____	_____
Brother/Sister	_____	_____	_____	_____
Brother/Sister	_____	_____	_____	_____
Brother/Sister	_____	_____	_____	_____
Brother/Sister	_____	_____	_____	_____

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IV. FINANCIAL NEED AND COLLEGE ACCEPTANCE

A. Will you be receiving any financial aid? (List all scholarships, grants, and their amount.
Ex. Tri Kappa Scholarship= \$1,000)

21st Century Scholar? ____yes ____no

B. Explanation of Financial Need/Extenuating circumstances:

C. Please list your EFC from FAFSA: _____

D. Name of College you will attend: _____

E. College Student ID Number: _____

(Must be located in Indiana to qualify for this scholarship or UofL and Bellarmine)

F. Date of College acceptance: _____

G. Estimated costs per year: _____

TRI KAPPA APPRECIATES YOUR INTEREST IN OUR SCHOLARSHIP

THIS SECTION TO BE COMPLETED BY SCHOOL COUNSELOR

Student Name _____

Class Rank _____ out of _____ students

College Aptitude Scores _____

Transcript Attached: Yes _____ No _____

Signature of Counselor

Date: