Applicant Name	
High School	
Alpha Kappa	Chapter

## SPRING 2023 APPLICATION FOR COLLEGE SCHOLARSHIP

(The applicant must complete this application)

Completed applications will be picked up at each High School on April 14, 2023.

## 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 extracurricular 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 12, 2023.

<u>COUNSELORS:</u> 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. APF	PLICANT'S PERSON	AL DATA	Applicant NameHigh School	
2.	Name: Home Phone: Email:	Cell F	Date: Phone:	
4.	Address:			
5.	(Must be locat	(Must be located in Clark County Indiana to qualify for this scholarship.)		
6.	Professional Goal:		·	
7.	High School Activities, Offices Held, Community and Church Participation, Honors Recei and Special Interests:			

Applicant Name	e
High School	

8. Please attach a typed essay of 200 words detailing personal goals and how your degree will prepare you for your career expectations.

		Applicant NameHigh School	
LY INFORMATION		Algii o	
Parents: Father	Deceased	Stepfather	Deceased _
Mother	Deceased	Stepmother	Deceased _
Father's Name:		Highest Education	
Attained:	<u>.</u>		
Occupation:		Employer:	
Years with Firm:		Income:	
Address (if other than st	tudent's home addre	ess):	
Mother's Name:		Highest Degree Attain	ed:
Occupation:			
Years with Firm:		Income:	
Address (if other than student's home address):			
Name	· ·	At Home In College	
Brother/Sister			-
Brother/Sister			-
Brother/Sister			_
Brother/Sister			

Brother/Sister \_\_\_\_\_ \_\_\_ \_\_\_\_

Brother/Sister \_\_\_\_\_ \_\_\_ \_\_\_

			Applicant NameHigh School
III. <u>FINANC</u>	CIAL NEED AND COLLEGE	ACCEPTANCE	111gh 50:1001
A.	Will you be receiving any financi Ex. Tri Kappa Scholarship= \$1,0		rships, grants, and their amount.
 21	st Century Scholar?yes	no	
В.	Explanation of Financial Need/E	xtenuating circumstand	ces:
C.	Please list your EFC from FAFS	A:	<del> </del>
D.	Name of College you will attend:		10.00 MARKET
E.	College Student ID Number:		
(M	ust be located in Indiana to qualif	y for this scholarship o	r UofL and Bellarmine)
F.	Date of College acceptance:		
G.	Estimated costs per year:		<u>.</u>
	TRI KAPPA APPRECIATES YO	OUR INTEREST IN OU	IR SCHOLARSHIP
* * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	****	*****
Ofice lend Nieue	THIS SECTION TO BE COM		L COUNSELOR
Class Rank	ne out of	students	
College Aptit Transcript At	tude Scorestached: Yes	No	
Signature of	Counselor	Date:	