

Applicant Name	
High School	

Spring 2024

**APPLICATION FOR COLLEGE SCHOLARSHIP FOR
ALPHA KAPPA CHAPTER OF TRI KAPPA**

I. General Rules Governing Scholarships:

1. Applicant must show evidence of academic competency (3.0 GPA unweighted)
2. Applicant must show 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 University 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.
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 an in person interview, if necessary.
10. **IMPORTANT - Applications must be printed and returned to your High School Counseling and Guidance office no later than April 10th, 2024.**

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 the last page of the application. Completed applications will be picked up by April 12, 2024

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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:	

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<p>8. Type an essay of 200 words or less detailing personal goals and career expectations:</p>	
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III. FAMILY INFORMATION

Parents:	Father __	Deceased __	Stepfather __	Deceased __
	Mother __	Deceased __	Stepmother __	Deceased __

Father/Guardian Name:			
Occupation:			
Address if other than student's home address:			
Employer:			
Years with employer:		Income:	
Mother/Guardian Name:			
Occupation:			
Address if other than student's home address:			
Employer:			
Years with employer:		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.

Brother/Sister	Name:		Age:		At Home __	At College __
Brother/Sister	Name:		Age:		At Home __	At College __
Brother/Sister	Name:		Age:		At Home __	At College __
Brother/Sister	Name:		Age:		At Home __	At College __
Brother/Sister	Name:		Age:		At Home __	At College __

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IV. FINANCIAL NEED AND COLLEGE ACCEPTANCE

A. Will you be receiving any financial aid? (List all scholarships, grants and their amounts. Ex: Tri Kappa Scholarship = \$500)	
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 ** Must be located in Indiana to qualify for this scholarship or UofL or 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:	