**Zeta Phi Beta Sorority, Inc**

**Iota Zeta Zeta Chapter**

**Application for Effie McKerson Annual Book Scholarship**

Please complete and return to:

Zeta Phi Beta Sorority, Inc.

Iota Zeta Zeta Chapter

Attn: Effie McKerson Scholarship Committee

P. O. Box 581303

Minneapolis, MN 55458-1303

The applicant shall provide the Effie McKerson Scholarship Committee:

1. A completed and signed application. Handwritten applications will not be accepted.
2. An official, sealed transcript from your current high school.
3. A sealed letter of recommendation from the individual listed as a reference.

**Note: Incomplete applications will not be considered.**

**Application Guidelines**

1. Individuals applying for the scholarship must:
2. Be a female, graduating seniors, attending school in the Minneapolis/St. Paul Metro or surrounding areas about to enter a 2-year or 4-year accredited institution of higher education. Women of color are strongly encouraged to apply.
3. Be in good academic standing and with a cumulative grade point average of “B” or better (3.0 on a 4.0 scale).
4. Involved in at least one of the following: civic, religious, community and/or extracurricular activities.
5. The completed application package must be mailed to the chapters post office box and postmarked no later than the deadline date of February 7, 2020. Any missing, incomplete or late documents disqualifies the applicant.
6. The award will be granted upon confirmation of registration in a college or university for summer or regular term of the fiscal year for which the scholarship is granted. A class schedule and a bursar’s letter or receipt must be submitted by the applicant to the chapter.
7. The award is a one-time book scholarship.

By completing and signing this application, if selected as the scholarship recipient, you give Zeta Phi Beta Sorority, Inc., Iota Zeta Zeta Chapter, the right to use your name and likeness in promotional materials (i.e. website, press releases and such).

**Instructions for completing the scholarship application**

1. Type or print neatly the answers to all questions.
2. Be sure to answer all of the questions in the “Extra-Curricular Activities” section.
3. On a separate sheet of paper complete the essay questions. Place your name, question number and date in the upper right corner or each sheet. The essay must be typed.
4. Include an official copy of your most recent transcript, sealed with your school’s official stamp or seal with your application packet. Broken or missing seals will not be accepted and will render your application incomplete.
5. Provide the name, mail and email address and phone numbers of your each of your reference. References must be from one of the following: one of your high school teachers, academic advisor, a community center employee where you have worked or volunteered, minister, civic organization or member of Zeta Phi Beta Sorority, Inc.
6. Letters of recommendation must be in sealed envelopes with signatures across the seal for inclusion in the application packet. Broken seals or missing signatures will not be accepted and will render your application incomplete.
7. The complete application packet with all required enclosures must be postmarked on or before February 7, 2020.
8. Return application packets to:

**Zeta Phi Beta Sorority, Inc.**

**Iota Zeta Zeta Chapter**

**Attn: Effie McKerson Scholarship Committee**

**P. O. Box 581303**

**Minneapolis, MN 55458-1303**

Submit all questions through email to iotazetazeta@hotmail.com and include **Effie McKerson Scholarship Committee** in the subject line. Inquires will be addressed within two business days.

**Personal Information**

1. Applicant name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

First Middle Last Date of Birth

1. Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 City State Zip Code

1. Home/cellphone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Parent(s)/ Guardian(s) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

First Middle Last Email address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

First Middle Last Email address

**Educational Background**

1. High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Location

1. Cumulative Grade Point Average: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expected date of graduation: \_\_\_\_\_\_\_\_\_\_\_\_\_
2. College or University you plan to attend: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Location

1. Are you receiving any other scholarships? circle Yes or No
	1. If yes, which ones? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How did you find out about the scholarship? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant Date

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Name of Applicant (print)

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Signature of Guardian Date

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Name of Guardian (print)

***Please include a sealed, official transcript with the scholarship application.***

**EXTRACURRICULAR ACTIVITIES**

**On a separate sheet of paper, complete the essay questions. Place your name, question number and date in the upper right corner or each sheet. The essay must be typed.**

1. What are your short-term and long-term educational goals?
2. Provide a list any honors and awards you have received.
3. Describe professional work and volunteer experiences including titles, places of employment and duties. Indicate whether the position(s) was full or part-time, paid or volunteer. Organize responses in chronological order beginning with the most current position and activities.
4. Describe hobbies, club memberships and/or sports activities.

**REFERENCE**

1. Please submit two recommendations from two of the three-person types below. Letters should include knowledge of the applicant, personal attributes and involvement in extracurricular activities.
	1. A financial member of Zeta Phi Beta Sorority, Inc. (Personal recommendation)
	2. Teacher, academic advisor or school administrator (Academic and personal recommendation)
	3. Community center employee, minister, civic organization or professional person (Character recommendation)
2. List name, occupation and email address of each reference.
	1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Occupation Email address

* 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Occupation Email address

Letters of recommendation must be in sealed envelopes with signatures across the seal for inclusion in the application packet. Broken seals or missing signatures will not be accepted and will render your application incomplete.

**Media release**

By signing this application, I hereby declare that all of the above statements are true. I give permission for my name and likeness to be used in publications by Zeta Phi Beta Sorority, Inc, Iota Zeta Zeta Chapter. I understand that all of the materials submitted will become the property of Zeta Phi Beta Sorority, Inc, Iota Zeta Zeta Chapter. I agree to accept the decision of the decision of the Effie McKerson Scholarship Committee.

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Signature of Applicant Date

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Signature of Guardian Date