

**Alpha Kappa Alpha Sorority, Incorporated
Pi Omicron Omega Chapter
Burlington, NC
2024 Scholarship Application**

Pi Omicron Omega Chapter of Alpha Kappa Alpha Sorority, Incorporated invites seniors in the Alamance Burlington School System, Private Schools in Burlington and Alamance County, and the Early College of Alamance Community College to apply for a scholastic scholarship. Alpha Kappa Alpha Sorority, Incorporated is a Greek letter organization for college and university educated women. Scholarships will be offered to students in the Alamance Burlington School System. Each year we offer scholarships to qualified seniors in the amounts of \$1000 for students who plan to attend a four-year college or university or \$500 for students who plan to attend a community college.

Application Guidelines

Each applicant must meet the following criteria:

1. The student must be a graduating senior attending a school in the Alamance Burlington School district.
2. The student must submit:
 - a. A completed application
 - b. An official transcript showing current GPA (weighted and unweighted) signed/stamped by the registrar/guidance department or school administrator
 - c. A 500 word, one page, typed essay
 - d. Two (2) letters of recommendation
 - i. High school guidance counselor, principal/assistant principal, or teacher
 - ii. An individual who can attest to the applicant's personal character and attributes (community member or leader/church leader)
3. The student must matriculate as a full-time student at an accredited two-year or four-year college or university in the Fall of 2024.
4. The student must have demonstrated exceptional leadership through community service and/or involvement in extracurricular activities.
5. The student must have achieved a minimum Grade Point Average (GPA) of 2.5.

Please return the completed application pack by April 19, 2024 to the following address:

Pi Omicron Omega Chapter
P.O. Box 2006
Burlington, NC 27216
Attention: Sharron Williams, Scholarship Committee Chair

If mailing, the application packet should be postmarked by April 15, 2024.

**Alpha Kappa Alpha Sorority, Incorporated
Pi Omicron Omega Chapter
Scholarship Application**

Scholarship Application

Personal Information

Applicant's Full Name: _____

Date of Birth: _____

Permanent Home Address: _____

City: _____ Zip Code: _____

Phone Number: _____

Email: _____

Parent(s) Name: _____

School/Academic Information

Current High School: _____

Class Rank: _____ Cumulative G.P.A.: _____

Have you been accepted to a college or university? _____

If so, list the colleges or universities below

Intended area of study: _____

Extracurricular Activities (Attach additional pages if necessary)

High School Honors/Awards:

Leadership Positions (School or Community):

School/ Community Activities: _____

You may attach an additional sheet if necessary to list additional information.

Essay

Applicant's Name: _____

This portion of the application is intended to assist the Scholarship Committee in obtaining a better sense of you as a person and as a student. Please include answers to the following questions in your statement:

- What individuals have influenced your development as a person committed to pursuing your educational goals?
- Why do you need this scholarship and if you receive it, how will it help you to reach your educational goals?

Please attach your typed essay to your application. This statement should be no more than 500 words in length.

Transcript Request Form

Applicant's Name: _____

This student is applying for a scholarship sponsored by the Pi Omicron Omega Chapter of Alpha Kappa Alpha Sorority, Incorporated. I am requesting that the transcript be provided to the student listed above prior to April 19, 2024. Please enclose the requested information in a sealed envelope addressed to:

Pi Omicron Omega Chapter
P.O. Box 2006
Burlington, NC 27216
Attention: Sharron Williams, Scholarship Committee Chair

Applicant's Grade Point Average: _____ Weighted & _____ Unweighted

Thank you,
Sharron Williams, Scholarship Committee Chair

Alpha Kappa Alpha Sorority, Inc.

Teacher/Community Member Recommendation Form

Applicant's Name: _____

Teacher/Community Member: This student is applying for a scholarship sponsored by the Pi Omicron Omega Chapter of Alpha Kappa Alpha Sorority, Incorporated. I am requesting that the following information be given to the student listed above before April 19, 2024. Please enclose the requested information in a sealed envelope addressed to:

Pi Omicron Omega Chapter, Alpha Kappa Alpha Sorority, Inc.
P. O. Box 2006
Burlington, NC 27216
Attention: Sharron Williams

Student's Background: Please check marks at the points that represent your evaluation of this student. If you have had no opportunity to observe, do not hesitate to say so.

How long have you known this applicant? _____

Please indicated the applicant's performance in following areas:

Characteristics	Outstanding	Good	Average	Unsatisfactory	No Basis for Judgment
Intellectual Ability					
Motivation					
Problem solving ability					
Perseverance					
Communication/Ability to Work with Others					

Name (please print): _____

Title: _____

Signature: _____ Date: _____

In addition to the information listed above, please include a letter of recommendation for this student.

Alpha Kappa Alpha Sorority, Inc.

Teacher/Community Member Recommendation Form

Applicant's Name: _____

Teacher/Community Member: This student is applying for a scholarship sponsored by the Pi Omicron Omega Chapter of Alpha Kappa Alpha Sorority, Incorporated. I am requesting that the following information be given to the student listed above before April 19, 2024. Please enclose the requested information in a sealed envelope addressed to:

Pi Omicron Omega Chapter, Alpha Kappa Alpha Sorority, Inc.
P. O. Box 2006
Burlington, NC 27216
Attention: Sharron Williams

Student's Background: Please check marks at the points that represent your evaluation of this student. If you have had no opportunity to observe, do not hesitate to say so.

How long have you known this applicant? _____

Please indicated the applicant's performance in following areas:

Characteristics	Outstanding	Good	Average	Unsatisfactory	No Basis for Judgment
Intellectual Ability					
Motivation					
Problem solving ability					
Perseverance					
Communication/Ability to Work with Others					

Name (please print): _____

Title: _____

Signature: _____ Date: _____

In addition to the information listed above, please include a letter of recommendation for this student.