



Iota Phi Lambda Sorority, Inc.

Gamma Chapter – Washington, DC

Alice P. Allen National Scholarship Award *2017-2018 Scholarship Information*

The Alice P. Allen National Scholarship is named in honor of Iota's second National President (1946-1950). This **\$2,000** scholarship is to be awarded to a teenage mother desiring to further her education beyond high school. Judging criteria will include academic performance/achievement, career aspirations, demonstrated leadership and financial need. Gamma Chapter manages this scholarship locally and awards **up to \$250.00** to the one winner selected to represent the chapter and compete for the up to \$2,000.00 national award.

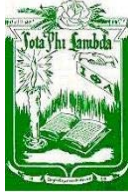
Eligibility Criteria

1. Graduating high school senior and a teenage mother.
2. Plans to pursue a degree in a business related field of study.
3. Must attend an accredited institution in the United States.
4. Must provide proof of enrollment before funds are allocated.
5. Submit the completed application packet to Gamma Chapter on or before **January 27, 2018**. The application packet must include the following:
 - a. Completed & Signed Student Application Form
 - b. Completed & Signed Scholarship Registration Form
 - c. Current official/certified academic transcript with SAT or ACT scores
 - d. Two letters of recommendations
 - e. A 300-500 word autobiographical essay (see guidelines below)
6. **Please email your submission packets to: scholarship@iota-gammadc.org**
7. Mail all original copies of the application packet to: Iota Phi Lambda Sorority, Inc.
Antoinette Kitchen
P.O. Box 75985
Washington, DC 20013
8. A committee of non-partisan judges will judge all essays. All decisions of the judges are final

Essay Guidelines:

- Compose an *autobiographical essay based on your career aspirations, most significant leadership experiences, and your most significant achievements*
- Double-spaced typewritten pages (about 300-500 words)
- Submit your essay on 8 1/2 x 11 inch white copy paper (one original and three copies)

IOTA PHI LAMBDA SORORITY, INC.
ALICE P. ALLEN SCHOLARSHIP AWARD



SCHOLARSHIP APPLICATION

STUDENT INFORMATION

Full Name: _____
Address: _____
Number & Street / City/ State / Zip Code
Date of Birth: _____ SSN#: _____ - _____ - _____
E-mail Address: _____ Phone#: _____
Parent(s)/Guardian(s) Name: _____
Parent's E-mail Address: _____

FAMILY PROFILE

Father's Name Address Occupation Check box, if deceased

Mother's Name Address Occupation Check box, if deceased

Non-Parent/ Guardian's Name Address Occupation Check box, if deceased
Annual Household Income: less than \$10,000 \$10,000-20,000 \$21,000-35,000
 \$36,000-50,000 \$51,000-65,000 more than \$65,000
Number of people in your home (including yourself): _____

Your Child/Children:

Name: _____ Date of Birth: _____ Sex: _____
Name: _____ Date of Birth: _____ Sex: _____

ACADEMIC PROFILE

High School: _____
City State
Cumulative GPA include scale: _____ Class Rank: _____ Total Class Size: _____
Dates of High School Attendance: _____ Expected Graduation Date: _____
SAT Total Score: _____ SAT Reading: _____ SAT Math: _____ SAT Writing: _____ Date Taken: _____
ACT Score: _____ Date Taken: _____

Business and Professional Women: Furthering the Dream of Economic Independence

Planned College/University: _____

Planned College Major: _____

ACTIVITIES AND HONORS

List all extracurricular activities in which you have been involved (church, school, community) within the past four years. List them in order of interest to you.

List all honors and other distinctions received and submit documentation (clippings, letters, certificates, and other verification).

List your work experience (any jobs you have held) (List job, kind of work, employer, dates of employment, and hours/week).

Who has been most influential in your school life? In what way?

RECOMMENDATIONS

List the name, title, address and telephone number of the teacher, counselor, or school staff who will submit a letter of recommendation for you. The letter should be returned to you, in a sealed envelope for inclusion with your application.

Name: _____ Title: _____

Address: _____ Phone #: _____

Name: _____ Title: _____

Address: _____ Phone #: _____

ESSAY

Please provide a 300-500 word double-spaced typewritten autobiographical essay. Please include your career aspirations, most significant leadership experiences, and your most significant achievements.

The decisions of the judges are final.

DISCLOSURE

The information provided in this form will be disclosed only to Iota Phi Lambda Sorority as required to determine your eligibility for an award. All information will be properly disposed of according to the Record Retention /Disposition Policy of Iota Phi Lambda Sorority after award of the scholarship has been made.

I hereby certify that the information provided in this application is to the best of my knowledge, true and correct. I have not knowingly withheld any facts or circumstances that could otherwise jeopardize consideration of this application.

STUDENT SIGNATURE: _____ DATE: _____

PARENT SIGNATURE: _____ DATE: _____

IOTA PHI LAMBDA SORORITY, INC.



SCHOLARSHIP REGISTRATION FORM

STUDENT INFORMATION

Full Name: _____

Address: _____
Number & Street / City/ State / Zip Code

High School Attending: _____ Location: _____

Sponsoring Chapter: Gamma Region: Eastern

Sponsoring Chapter: President: Ms. Tangila Sanders

Chapter Coordinator: Ms. Antoinette Kitchen Phone#: _____

Address of Chairperson: P.O. Box 75985, Washington, DC 20013

PROSPECTIVE SCHOLARSHIP CANDIDATE SHOULD READ AND SIGN THE FOLLOWING:

I understand:

1. That I must attend a college or university and major in a related field of business.
2. That if I am a winner, I will need to provide documentation of my family income (preceding year's W-2 or IRS 1040) and that all scholarship funds will be sent directly to the school of my choice to assist with my tuition after I have submitted the official document of my enrollment along with a schedule of my classes.
3. That the scholarship is a one-time award.
4. That any questions I have regarding the contest may be answered by the Chapter sponsoring me.
5. That I have read the above items and understand my rights.

Signature of Contestant

Date

DECLARATION OF ORIGINALITY

I hereby declare that the writing of the attached essay reflects my own work, except where quoted materials are identified. I give Iota Phi Lambda Sorority, Incorporated permission to publish my essay in their National Journal or to use it in any other promotional manner desired.

Date: _____

Signature: _____
Contestant

Signature: _____
Parent

Signature: _____
Chapter Coordinator