NAME	OF APPLICANT	



NORTH CAROLINA ALPHA DELTA KAPPA SCHOLARSHIP APPLICATION

2018-2019

THIS SCHOLARSHIP APPLICATION INCLUDES THE FOLLOWING COMPONENTS:

- 1. Coversheet with Alpha Delta Kappa sponsoring information
- Scholarship descriptions for: <u>Eunice Riggins Memorial Scholarship</u> & <u>Mary Rose Mills-Linda Rankin Memorial Scholarship</u>
- 3. Applicant verification
- 4. Applicant data sheet
- 5. List of extracurricular involvement and honors
- 6. Parent/Guardian Endorsement
- 7. High School transcript showing class rank GPA (weighted or unweighted)
- 8. College entrance exam scores (either SAT or ACT)
- 9. Two letters of recommendation
- 10. Personal statement from the applicant detailing his or her plans, career goals, and reasons for wanting this scholarship.

ALL APPLICATION COMPONENTS MUST BE <u>RECEIVED BY</u> THE LOCAL CHAPTER SCHOLARSHIP CHAIRMAN LISTED BELOW BY: *FEBRUARY 1**

FAILURE TO MEET THIS DEADLINE WILL ELIMINATE THE APPLICANT FROM CONSIDERATION.

SPONSORING CHAPTER	District
Chapter President:	
*Chapter Scholarship Chairman:	
*Scholarship Chair's Address:	

Email:	
Phone:	
NAME OF APPLICANT	
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The Eunice Riggins Memorial Scholarship is open to any young woman who is currently graduating from an accredited high school in North Carolina and who expects to enroll in a four-year college or university in North Carolina next fall, and who meets eligibility requirements.

This is a one-year (non-renewable) scholarship in the amount of \$2,000.

Eligibility Requirements:

- a. Academic rank in top 10% of class
- b. Minimum SAT score of 1220 or ACT composite score of 25
- c. Good character
- d. Participation in extra-curricular activities (school & community)
- e. Financial need--not the primary consideration

_____ (Yes/No) I am applying for the <u>Eunice Riggins Memorial Scholarship.</u>

The Mary Rose Mills-Linda Rankin Memorial Scholarship is open to any student who is currently graduating from an accredited high school in North Carolina and who expects to enroll in a four-year college or university next fall and who meets eligibility requirements. This is a one-year (non-renewable) scholarship in the amount of \$2,000.

Eligibility Requirements:

- a. Academic rank in top 10% of class
- b. Minimum SAT score of 1290 or ACT composite score of 27
- c. Good character
- d. Participation in extra-curricular activities (school & community)
- e. Financial need--not the primary consideration

_____(Yes/No) I am applying for the Mary Rose Mills-Linda Rankin Memorial Scholarship.

3. APPLICANT VERIFICATION:

I verify that the informati	on and statemen	ts made in this applica	ation are complete and accura
	APPLICANT'S SIGNATURE		 DATE
		NAME OF APPLICANT	
			Page 3
4. <u>APPLICANT DATA SH</u>	<u>IEET</u> : (Please type	e or print in ink)	
Name:			
Last Home Address:	First	Middle	Preferred Name
Street/PO B	вох		
City		State	Zip
Date of Birth:			
Month		Day	Year
Phone Number(s):			
Email Address:			
Name of High School:			
_ High School Address:			

Expected Graduation Date:
Father or Guardian's Name:
Mother or Guardian's Name:
How many persons are dependent on your parents?
What work (for pay) have you done during the last school year or will plan to do this summer?
Name of college or university you plan to attend and have been accepted:
What is the approximate cost to attend the college/university of your choice next year?
Have you applied for financial assistance through the college's Student Aid Office and/or through a need analysis form (FAFSA) and/or Profile?
Other scholarships for which you have applied:
NAME OF APPLICANT

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5. EXTRACURRICULAR INVOLVEMENT AND HONORS: Please provide a typed list of your extracurricular activities (clubs, sports, fine arts groups, volunteer work, scouting, hobbies, jobs, internships, etc.). Include the years you participated and the number of hours per week devoted to each. Also list awards or recognitions you have received. Attach as many pages as needed.

6. PARENT OR GUARDIAN ENDORSEMENT

l,	hereby declare that, to the best of
my	
Parent or Guardian please print	
knowledge, the foregoing statements are c	omplete and correct, and I approve
	's application for this (these) North Carolina Alpha
Name of Applicantplease print	
Delta Kappa Scholarship(s).	
Signature of Parent/Guardian:	
Date	

- 7. <u>TRANSCRIPT</u>: Please attach your official mid-year transcript showing courses taken, class rank and GPA (weighted and unweighted). Your transcript should be in a sealed envelope with the signature of your school counselor across the seal.
- **8.** <u>COLLEGE ENTRANCE EXAMINATION SCORES:</u> Please attach a copy of your college entrance exam scores--either <u>SAT or ACT.</u>
- **9.LETTERS OF RECOMMENDATION:** Please submit two letters of recommendation, as follows: one from a teacher; one from another adult of the applicant's choosing (teacher, school counselor, coach, pastor, supervisor, or other qualified individual). The letters should outline the character traits, special talents and abilities, examples of leadership and service, etc., of the applicant. The letters should be submitted with the scholarship application to the Scholarship Chairman of the sponsoring Alpha Delta Kappa chapter **to be received by the due date of February 1**.
- **10.**PERSONAL STATEMENT: Please attach a typed personal statement detailing your college plans, career goals and your reason(s) for wanting this scholarship.

Please remember that your application must <u>be received</u> by the Alpha Delta Kappa Scholarship Chairman listed on the front cover by <u>February 1</u>.