



**APPLICATION FOR THE 2019-2020  
ALPHA KAPPA ALPHA SCHOLARSHIP  
and the  
Dr. Peggy L. Payne Memorial Scholarship Award for Careers in Education**

Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_  
Last First MI

Address \_\_\_\_\_

City State Zip Code E-mail Address

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

High School \_\_\_\_\_

GPA weighted \_\_\_\_\_ GPA unweighted \_\_\_\_\_

Field(s) of Interest/ Intended Major \_\_\_\_\_

Father/Guardian \_\_\_\_\_ Occupation \_\_\_\_\_

Place of Employment \_\_\_\_\_

Mother/Guardian \_\_\_\_\_ Occupation \_\_\_\_\_

Have you received other scholarships, grants, or awards? Yes \_\_\_\_\_ No \_\_\_\_\_

Total Amount \$ \_\_\_\_\_ Please explain any restriction on the aforementioned award(s).

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

What circumstances, if any, contribute to your need for financial aid?

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

PLEASE SEE PAGE 2

List school/ Community/ Church Activities - Include leadership experience and feel free to attached additional sheet(s).

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To what four-year colleges or universities are you applying? \_\_\_\_\_

\_\_\_\_\_

To which colleges or universities have you been admitted?

\_\_\_\_\_

Have you participated in #CAP College Admission Process Program? Yes \_\_\_\_\_ No \_\_\_\_\_

*(Please note: Should your plans change, you will still need to meet the stated criteria to remain eligible.)*

#### ESSAY

On a separate sheet, write a one-page essay on the topic: "A College Education: My Key to the Future" *(Please explain in detail how you expect your college education to make a difference in your future and the community.)*

**FOR THE DR. PEGGY L PAYNE MEMORIAL SCHOLARSHIP FOR CAREERS IN EDUCATION:** Please write a one-page essay on the topic: "A College Education: My Key to the Future as an American Educator."

**INSTRUCTIONS:** Mail your completed typed and signed application and all supporting materials. To complete a typed application access at [www.dbo-aka.org/scholarship](http://www.dbo-aka.org/scholarship)

**POSTMARKED ON OR BEFORE MARCH 31, 2020 AND SUBMIT TO:**

Alpha Kappa Alpha Sorority, Inc  
Delta Beta Omega Chapter  
P.O. Box 64981  
Phoenix, AZ 85082-4981  
Attention: Scholarship Committee

#### SUPPORTING MATERIALS

- Two letters of recommendation: One from a teacher, guidance counselor and/or extracurricular advisor AND one from person in the community (i.e. pastor, employer).
- Bio with school and community leadership and/or involvement.
- A photo of yourself (no-selfies) no larger than 4x6 with your FULL name on the back.
- Your double spaced essay with your name in the upper left corner.
- Include a sealed AND signed official transcript from the registrar's office, which indicates class rank, grade point average, and SAT or ACT scores.
- Additional typed sheets to specific questions within application with name in the upper left corner.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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