

Alpha Kappa Alpha Sorority, Inc.  
Delta Sigma Omega Chapter

Agnes V. Roberts  
Academic Scholarship Program  
2015



P.O. Box 2274  
Salisbury, MD 21804



# Alpha Kappa Alpha Sorority, Incorporated

## DELTA SIGMA OMEGA

P.O. Box 2274

Salisbury, Maryland 21804

Delta Sigma Omega Chapter of Alpha Kappa Alpha Sorority, Inc. provides financial assistance to college bound high school graduates from the Lower Eastern Shore through the Agnes V. Roberts Scholarship Program. Scholarships are awarded based on demonstrated financial need, academic performance, and enrollment in a college, university, or technical school in preparation for a career. There are two (2) types of scholarships available to graduating seniors.

**The Academic Scholarship** for 2015 (maximum of 2 awards) is a \$1,000.00 award to be disbursed to the institution of higher learning that the award winner will attend in the fall of their graduating year.

#### Academic Scholarship Eligibility:

- ✓ Overall GPA of 3.0
- ✓ Completed application
- ✓ 500 word essay on the importance of community service which must include applicants name date and signature
- ✓ Copy of an official transcript in a sealed envelope from the Guidance Department.
- ✓ Two (2) letters of recommendation from responsible individuals, other than relatives.
- ✓ An interview will be conducted with the members of the scholarship committee. Interviews will be scheduled no later than the fourth week of April 2015. Applicants will be notified of the location and time.

Students who apply for the Academic Scholarship may also apply for the Ivy Award.

**The Ivy Award** for 2015 (maximum of six awards) is a \$250.00 award to be disbursed to the institution of higher learning that the award winners will attend in the fall of their graduating year.

#### Ivy Award Eligibility:

- ✓ Overall GPA of 2.5
- ✓ Completed application
- ✓ Copy of an official transcript in a sealed envelope from the Guidance Department
- ✓ Two (2) letters of recommendation from responsible individuals, other than relatives.

Students may obtain applications from the school's guidance office or from Alpha Kappa Alpha Sorority, Delta Sigma Omega Chapter members. Application packets for consideration must be postmarked by March 31, 2015. Applications post marked after March 31, 2015 will not be considered. All applications should be mailed to:

Delta Sigma Omega Chapter  
Alpha Kappa Alpha Sorority, Inc.  
Academic Scholarship Program  
P.O. Box 2274  
Salisbury, Maryland 21804

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ACADEMIC SCHOLARSHIP 2015			
APPLICANT INFORMATION			
Name:			
Date of Birth:	Phone:	E-mail:	
Current address:			
City:	State:	Zip Code:	
Parent/Guardian Name:			
Address:	State:	Zip Code:	
Parent/Guardian Name:			
Address:	State:	Zip Code:	
STATEMENT OF NEED			
Do you have a personal computer? Yes___ No___		Do you have access to a personal computer? Yes__ No___	
Have you applied for Federal Student Financial Aid? Yes_____ No_____			
Annual Household Income of Parents or Guardians:			
Number in Household:		Total number of school age children living at home:	
Are you a first generation college student? Yes_____ No_____			
Do you have siblings attending college? If so, list those currently attending college? _____			
COLLEGE/UNIVERSITY INFORMATION			
I have been accepted to:			
Address:			
Major:			
I have been accepted to:			
Address:			
Major:			
COMMUNITY SERVICE			
The number of Volunteer service hours completed:			
REFERENCES			
Name:	Address:	Phone Number:	
Name:	Address:	Phone Number:	
SIGNATURES			
Signature of applicant:			Date:
Signature of Parent/Guardian:			Date:

**Please remember to include an official transcript and  
Two (2) letters of recommendations**

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IVY AWARD 2015			
APPLICANT INFORMATION			
Name:			
Date of Birth:	Phone:	E-mail:	
Current address:			
City:	State:	Zip Code:	
Parent/Guardian Name:			
Address:	State:	Zip Code:	
Parent/Guardian Name:			
Address:	State:	Zip Code:	
STATEMENT OF NEED			
Do you have a personal computer? Yes___ No___		Do you have access to a personal computer? Yes__ No__	
Have you applied for Federal Student Financial Aid?			
Annual Income of Household Parents or Guardians:			
Number in Household:		Total number of school age children living at home:	
Will you be a first generation college student?			
Do you have siblings attending college? If so, list those currently attending college.			
COLLEGE/UNIVERSITY INFORMATION			
I have been accepted to:			
Address:			
Major:			
I have been accepted to:			
Address:			
Major:			
VOLUNTEER SERVICE			
Number of volunteer service hours completed:			
REFERENCES			
Name:	Address:	Phone Number:	
Name:	Address:	Phone Number:	
SIGNATURES			
Signature of applicant:			Date:
Signature of Parent/Guardian:			Date:

Please remember to include an official transcript and  
Two (2) letters of recommendations