



\$500 SCHOLARSHIP offered by Chicago Alumnae Panhellenic, Chicago, IL

The Chicago Alumnae Panhellenic Association is offering a non-restrictive \$500 scholarship for the 2009 - 2010 academic year to sorority women in need of financial assistance. Each applicant must matriculate and remain in her NPC chapter throughout the 2009-2010 academic year.

ELIGIBILITY CRITERIA

- 1. Greek women attending a higher education institution college/university in Illinois or Greek women who are graduates of an Illinois high school attending a higher education institution college/university outside of Illinois.
- 2. A freshman, sophomore, junior, or senior requiring a fifth year for completion of her major attending an accredited 4-year college/university.
- An initiated member in good standing of a National Panhellenic sorority.
- Have a grade point average sufficient of 3.2 or higher.
- Demonstrate financial need.
- Demonstrate on-going involvement in her sorority.

HOW TO APPLY/CHECKLIST

- Obtain application materials from the Chicago Alumnae Panhellenic Web Site, www.chicagopanhellenic.org
- Complete the forms thoroughly and ensure <u>all</u> items are received on time. We cannot accept late or incomplete applications.
- 3. Return the three (3) page application and an official college/university transcript to:

Courtney Scott, CAP President 1969 N Lincoln Ave., 2nd Floor Chicago, IL 60614

E-mail: chicagopanhellenic@yahoo.com

Make sure your materials are postmarked no later than APRIL 1, 2008.

The awarding of scholarships will take place at our annual scholarship tea held on April 26, 2009.





APPLICATION FOR SCHOLARSHIP AWARD

CHICAGO ALUMNAE PANHELLENIC 2009 SCHOLARSHIP APPLICATION

INSTRUCTIONS: Complete <u>ALL portions of the 3-page application</u>. NO RESUMES ACCEPTED. If an item does not pertain to you, please put N/A or a dash on the line so we are aware that no answer applies. <u>PLEASE TYPE OR PRINT CLEARLY</u>. Use a separate sheet of paper when needed.

				Birth date:	
Name:				Sorority:	
Last	First	1	Middle Initial		
Home Address:				Phone:	
Street	City Sta	te	Zip		
High School Attended:			Grac	luation Date:	
High School:					
(City Co	unty	State	Zip	
FAMILY STATUS:		C a the a w a	Name		
Mother's Name:					
Mother's Address:					
Street	. 9	County	State	Zip	
Father's Address:					
Street	City	County	State	Zip	
Mother's Occupation:		Fath	ner's Occupation	1:	
Employer:		Emp	oloyer:		
How many children, includin	g you, are depende	nts:			
Are your parents assisting a	ny other members o	of your family to a	attend college n	ext year?Yes	No
If yes, to what extent?					
COLLEGE:					
College currently attending:			Reg	gistrar's office phon	e:
Your College address:					
E-mail:		Phone Number:			
Degree Sought:		Status: _	1st yr 2	nd yr 3rd yr	_4th yr5th yr
Maior(s)·					





Cumulative G.P.A.:	(An Official Transcript is Required)				
Which address can you be reached at in April	2009? COLLEGE MOTHER FATHER OTHER				
Phone # you can be reached at in April 2009? When is Final Week?					
COLLEGIATE ACTIVITIES: List membership in organizations: name, desc hours per week spent in each activity.	cription of each if necessary, offices/chairs held and approximate				
SORORITY (Chapter Activities/Offices/Comm	ittees) Academic Year Hours/Week				
CAMPUS ACTIVITIES (Organizationsinclude sports/teams - colleg	Academic Year Hours/Week iate or intramural)				
COLLEGIATE ACADEMIC HONORARIES AN	ND RECOGNITIONS (Societies)				
NON-ACADEMIC HONORARIES AND RECO	OGNITIONS (Societies)				
VOLUNTEER WORK (In addition to sorority in Including Campus/Community/Church/Synago					





FINANCES:					
List scholarships, grants, loans received currently giving amount, source and duration.					
LOANS					
Fotal amount outstanding to date:					
EMPLOYMENT:					
ist your past and current employment record of the last 3 years, including dates:					
Are you employed during the school year?YesNo. If yes, in what capacity (include campus					
employment)?the school year:resno. If yes, if what capacity (include campus					
mploymenty.					
Place of employment:Hours/week:					
Amount earned:					

Please answer the following questions on a separate sheet of paper. Be specific as possible. No more than 3 pages double spaced for each answer.

- > WHY ARE YOU APPLYING FOR THIS SCHOLARSHIP?
- > WHAT ARE YOUR GOALS AND PLANS FOR THE FUTURE?

<u>DEADLINE:</u> Send this THREE (3) PAGE APPLICATION and an OFFICIAL TRANSCRIPT by <u>April 1, 2009</u> to: Courtney Scott, CAP President, 1969 N Lincoln Ave., 2nd Floor, Chicago, IL 60614