

# **Zeta Phi Chapter Omega Psi Phi Fraternity, Inc. Scholarship and Grant Program for Graduating High School Seniors**

## **Application Instructions**

- 1. Applicants should complete the official Zeta Phi Scholarship and Grant application form. Neat typewritten applications and supporting statements are preferred over handwritten submissions.**
- 2. Applicants should write and submit a one-page letter to Zeta Phi's Scholarship and Grant Committee explaining how an Omega scholarship or grant will help them to achieve their educational goals. Applicants desiring consideration based upon artistic or creative achievement should provide evidence of past accomplishments, such as copies of newsclippings, certificates, awards, as well as letter(s) of support from a person or persons knowledgeable of the artistic or creative area and the applicant's accomplishments and potential.**
- 3. Submit a copy of your high school transcript.**
- 4. Request that 3 responsible individuals who know of your past performance and future potential provide letters of reference to be submitted along with the application form. Request one form from a past teacher or educator.**
- 5. Applicants wishing to be considered for an Educational Grant must complete Part II of the application, providing family financial information. Applicants applying for Academic and Achievement Scholarships are required to complete Part I.**
- 6. Submit completed application form, 1-page letter, a copy of high school transcript and 3 letters of reference by May 1 each year for consideration for the upcoming academic year.**

# Zeta Phi Chapter Omega Psi Phi Fraternity, Incorporated Scholarship and Grant Program

## APPLICATION FORM

### PART I - Applicant Information

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Address \_\_\_\_\_  
street city/state/zip

State of Residence \_\_\_\_\_ How long? \_\_\_\_\_ Phone \_\_\_\_\_ Race \_\_\_\_\_

Name of High School \_\_\_\_\_ Graduation Date \_\_\_\_\_

Address \_\_\_\_\_  
street city/state/zip

H.S. Grade Point Average \_\_\_\_\_ Class Rank \_\_\_\_\_ SAT or ACT Composite Score \_\_\_\_\_

Have you attended an educational institution beyond high school? \_\_\_\_\_

If yes, name of institution \_\_\_\_\_

Address \_\_\_\_\_  
street city/state/zip

What college or postsecondary institution do you plan to attend in 20\_\_\_\_ ?

Name \_\_\_\_\_ Address \_\_\_\_\_

Educational Goal (course of study) \_\_\_\_\_

Upon completion of course, what degree will you receive?

Associate Degree \_\_\_\_\_, Bachelors Degree \_\_\_\_\_, Other (specify) \_\_\_\_\_

Have you applied for any other financial aid? \_\_\_\_\_

Amounts you have been awarded \_\_\_\_\_

Honors and Awards \_\_\_\_\_

School and Community Activities \_\_\_\_\_

Work Experience (organizations, position, year) \_\_\_\_\_

Are you related to a member of Omega Psi Phi Fraternity, Incorporated? \_\_\_\_\_

What is the relationship? \_\_\_\_\_

Attach a brief letter to the Scholarship and Grant Committee explaining how an Omega Scholarship or Grant will help you achieve your educational goal. You may use this form for your letter.

**PART II - Family Information**

Applicant's Age \_\_\_\_\_ Marital Status \_\_\_\_\_

Applicant's and spouse's total income and benefits for 20\_\_\_\_, \$ \_\_\_\_\_

Number of persons dependent on applicant \_\_\_\_\_

Did applicant live with parents for more than 42 days in 20\_\_\_\_ ? Yes \_\_\_\_\_ No \_\_\_\_\_

Did applicant receive more than \$750 in support from parents in 20\_\_\_\_ ? Yes \_\_\_\_\_ No \_\_\_\_\_

Was applicant claimed as an exemption on parents' IRS tax report for 20\_\_\_\_ ? Yes \_\_\_\_\_ No \_\_\_\_\_

If applicant answered yes to any of the preceding questions, provide the following information on applicant's parents.

	Father	Mother
Name:	_____	_____
Address:	_____	_____
Place of Employment:	_____	_____
20____ Income	_____	_____
Other Income	_____	_____

Number of dependents in parents household \_\_\_\_\_

Number of dependents enrolled in postsecondary education in the coming academic year? \_\_\_\_\_

Briefly explain aspects of applicant's and parent's financial circumstances that might be helpful to the Scholarship Committee.

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

Submit application, letter from applicant, copy of high school transcript and 3 letters of reference to address below by May 1, 20\_\_\_\_.

Omega Scholarship and Grant Program  
Zeta Phi Chapter  
Omega Psi Phi Fraternity, Incorporated  
P.O. Box 691  
Indianapolis, Indiana 46206

\_\_\_\_\_  
Applicant's Signature Date

\*  
\_\_\_\_\_  
Parents' Signature Date

\* Parents' signature is required if applicant is under age 23, or if applicant was either claimed by parents as a tax exemption, lived with parents for 42 days or more, or received more than \$750 in support from parents.

PART III - Letter to Zeta Phi Chapter Scholarship and Grant Committee:

To: Zeta Phi Chapter Scholarship and Grant Committee

From: \_\_\_\_\_

Applicant Name

RE: Scholarship and/or Grant