



ZETA PHI BETA SORORITY INC. *Gamma Omicron Zeta Chapter*

*Zeta Phi Beta Sorority,
Inc.*

*Gamma Omicron Zeta
Chapter*

*2019-2020 Scholarship
Application*



Dear applicant:

Zeta Phi Beta Sorority, Inc. was founded on January 16, 1920 at Howard University in Washington, DC by five zealous collegiate women. It has since chartered hundreds of chapters worldwide and has a membership delegation of 100,000+ women. Since its inception, Zeta Phi Beta Sorority, Inc. has been an example for women to follow. The sorority takes immense pride in transforming communities we serve through volunteerism, service and philanthropy from not only sorority members, but also, members of our auxiliary groups.

Gamma Omicron Zeta Chapter has been serving the social and educational needs of Essex County since March 2, 1953. Our sorority was founded on the principles of scholarship, service, sisterhood and finer womanhood: pillars that weave through every community and capacity-building initiative we host. Particularly for young women and girls in Essex County, our commitment to their educational journeys and leadership development is crucial to the enhancement of our global society and ultimately, the future.

As a chapter, we offer our congratulations as you embark upon this very important milestone in your life. The process of selecting a post-secondary institution to further your education can be an overwhelming task, coupled with the reality of financing it. With this in mind, the members of Gamma Omicron Zeta Chapter would like to extend you an opportunity of financial support during this process.

Please find attached our Scholarship Application, along with the terms and conditions if you are selected as a recipient. Read the enclosed instructions carefully and include all necessary documents to be e-mailed or mailed with a **postmarked date no later than January 10, 2020. Late and/or incomplete applications will not be considered.**

If you are selected to receive one of the scholarships we are offering this year, your guidance counselor will be notified either by phone or email *and* an official letter will be sent to your home address. **Please note: We will not notify applicants who are not selected.**

If you have any questions or need additional information, please do not hesitate to contact **Jovan Cameron at jccameron@hotmail.com**. Again, congratulations and we pray for continued success in your future endeavors!

Sincerely,

Zemora Matthews

Zeta Phi Beta Sorority, Inc.

Gamma Omicron Zeta Chapter

2nd Vice President - Scholarship & Education Committee Chairperson



The Scholarship and Education Committee will review the application materials of all candidates and determine which candidates qualify for an interview. The committee will conduct interviews before final selections are made. **Please note: This is a needs-based scholarship.**

STAGE 1: APPLICATION

These are the eligibility and application requirements:

- Applicant must be a female high school senior
- Applicant must be currently attending and graduating from a high school within Essex County, NJ in June 2020
- Applicant must have a minimum grade point average of 2.5 (on a 4.0 scale)
- Applicant must show demonstrated involvement in academic, athletic, service or professional extracurricular activities
- Two letters of recommendation
- One (1) official copy of your transcript

STAGE 2: INTERVIEW

Applicants who meet the criteria and submit complete applications (supplemental items included) will be granted an interview. Interviews will occur in February 2020. All applicants will be notified by mail and/or electronic mail of the specific date, time and location.

At the interview, applicants should:

- Bring an updated transcript reflecting grades through the current marking period
- Be prepared to talk about the following
 - Community Involvement (i.e. volunteerism through church, school, or community outreach programs)
 - Academic activities, extracurricular activities, special interests, hobbies and work
 - Leadership skills/initiative (i.e. offices held in organizations)
 - Educational aspirations and career goals

NOTE: Please see the last page of this scholarship application for a checklist of required items required for the application. *If any item or portion of the application is omitted, the entire application will be disqualified.*



ZETA PHI BETA SORORITY INC. *Gamma Omicron Zeta Chapter*



PERSONAL HISTORY

Student Name: _____

Street Address: _____ Apt#: _____

City, State, Zip Code: _____

Phone: _____ Date of Birth: _____

Student Email: _____

FAMILY HISTORY

Mother/Guardian Name: _____

Mother/Guardian Address: _____

Occupation: _____

Phone: _____ Email: _____

Father/Guardian Name: _____

Father/Guardian Address: _____

Occupation: _____

Phone: _____ Email: _____

Number of adults (18 years or older) in household: _____

Number of children (17 years or younger) in household: _____

Number of siblings in college: _____



POST-SECONDARY PLANS

Identify the college(s) and location(s) where you have been accepted and/or where you have applied.

NAME	ADDRESS

What is your intended major? How will your intended major contribute to your short and/or long-term career plans?



ESSAY PROMPTS

Choose **one (1)** of the following prompts and respond in **500** words in the space below. Feel free to attach a separate document. Clearly identify which prompt you have selected to answer.

- 1) What do you consider to be the most important societal problem we face today? Why?
- 2) If you had the authority to change your community/school in a positive way, what specific changes would you make? Why?
- 3) Why have you chosen to spend the next four years of your life in college and how have your academic, personal and/or extracurricular involvement prepared you for that next step?



SIGNATURE PAGE

If an offer is extended, I am willing to appear for a personal interview, during the month of February 2020. I also understand that the decision of the Scholarship & Education Committee is final.

Signature of Applicant

Date

Printed Name of Applicant

Date

Signature of Parent/Guardian

Date

Printed Name of Parent/Guardian

Date



VERIFICATION OF ACADEMIC PERFORMANCE/STANDING

TO BE COMPLETED BY SCHOOL GUIDANCE COUNSELOR ONLY!!!

Student Name: _____

Student Address: _____

High School (Name and City): _____

Date of Graduation: _____ G.P.A.: _____ as of _____

Class Rank: _____ of _____ students in a graduating class as of _____ Not Applicable _____

SAT Scores: Verbal _____ Math _____ Writing _____

ACT Score: English _____ Math _____ Reading _____ Science _____ Composite: _____

Please list any scholarships awarded to date:

Scholarship/Award Name	Monetary Amount

Guidance Counselor Signature Required

I certify that the above statements are accurate as of _____ Date

Guidance Counselor – Signature

Guidance Counselor – Print Name

Phone Number

Email Address



CHECKLIST

Your application **must** include the following to be considered complete, and be submitted/postmarked by the deadline of **January 10, 2020**:

- Completed application (including the signature page); ***typed applications preferred***
- Two (2) wallet-sized **headshot**
- Completed **“Verification of Academic Performance”** page 8 – signed by guidance counselor
- Send **NO MORE THAN THE TWO (2) REQUIRED letters of recommendation** – one from a school official and the other from a professional. All letters must be written on appropriate letterhead and must be current, dated and include original signatures.
- An **official school transcript** must be included in your application packet, which should indicate your current G.P.A., class rank, and ACT/SAT score. **Home-schooled applicants must have their transcripts and ACT/SAT scores verified by an authorized school official.**
- The required essay must be typed and answered completely.
- Resume** indicating extracurricular activities, offices held, and years of participation; your volunteer experience; honors or special recognition you have received in high school and your work experience, if any.
- Be sure the application is complete and **emailed to jccameron@hotmail.com** or mailed to the address below with all enclosures **POSTMARKED NO LATER THAN January 10, 2020.**

Applications that are submitted late or incomplete will not be considered. Fill in each question as applicable and answer N/A on lines that do not pertain to you.

**Zeta Phi Beta Sorority Inc.
Gamma Omicron Zeta Chapter
Attn: Scholarship & Education Committee
P.O. Box 1001
Newark, NJ 07101**

***** PLEASE NOTE: ZETA PHI BETA SORORITY INC., GAMMA OMICRON ZETA CHAPTER RESERVES THE RIGHT TO WITHDRAW A SCHOLARSHIP AWARD IF A RECIPIENT RECEIVES A FULL SCHOLARSHIP FROM THE SCHOOL THEY ATTEND. *****

****Matriculation and proof of class registration to an accredited four-year college/university will be required to receive this scholarship. Even if you have not been accepted at the time the application is due, you may still apply pending your acceptance.****