



National Sorority Phi Delta Kappa, Inc. Alpha Chapter

“To foster a spirit of sisterhood among teachers and to promote the highest ideals of the teaching profession”

December 6, 2019

Greetings Guidance Counselors!

The National Sorority of Phi Delta Kappa, Inc. is an international teaching sorority that strives to provide today's youth with adequate resources for a successful college experience. Attached please find a scholarship application for interested seniors. Below is a list of criteria eligibility.

The applicant shall:

- Be male or female who plans to enter college for training in the field of education.
- Show evidence of need by declaring family size and proof of family income. (W2 or 1040)
- Be graduating seniors at the time the applications are submitted.
- Submit official high school transcripts, with Registrars' seals.
- Submit official SAT/ACT scores.

Completed applications should be received on or before January 11, 2020. Any applications received after January 11, 2020 will not be reviewed. If you should have any questions or concerns, I can be reached by phone at 201 232-9645 or by email at mwebbmiller@aol.com Forward applications to:

Mary Webb-Miller
255 Pacific Avenue
Jersey City, New Jersey 07304

Educationally Yours,
Mary Webb Miller
Mary Webb-Miller
Scholarship Chair

Perry L. Jackson
Perry L. Jackson
President



National Sorority of
Phi Delta Kappa, Inc.

Undergraduate Scholarship Application 2020

Application MUST be submitted through the
Local Chapter Scholarship Chairperson to be considered

Scholarship Form

007

2019 - 2020

CHAPTER:		REGION:	
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CITY:		STATE:		ZIP:	
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- AN OFFICIAL HIGH SCHOOL TRANSCRIPT, WITH REGISTRAR'S SEAL, MUST ACCOMPANY THIS APPLICATION
- MUST SUBMIT PARENTS/GUARDIANS PROOF OF INCOME, I.E. W2 FORM, LAST YEAR'S TAX RETURNS, GOVERNMENT EVIDENCE, ETC.

<p>APPLICANT, PLEASE ATTACH AN INDIVIDUAL WALLET SIZE 2" X 3" COLOR PROFESSIONAL PHOTOGRAPH (REQUIRED)</p>	APPLICANT'S FULL NAME:				
	BIRTH DATE:			AGE:	
	SSN (LAST FOUR DIGITS)				
	HOME ADDRESS –				
	STREET ADDRESS:				
	CITY:		STATE:		ZIP:
	HOME PHONE:			CELL PHONE:	
	EMAIL ADDRESS:				

EDUCATIONAL INFORMATION

FROM WHICH HIGH SCHOOL WILL YOU GRADUATE?		GRADUATION DATE:	
WHAT COLLEGE DO YOU PLAN TO ATTEND?		ENROLLMENT DATE (MONTH/YEAR):	
WHICH EDUCATIONAL DEGREE DO YOU PLAN TO PURSUE?			

YOUR HONORS AND AWARDS

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YOUR SCHOOL AND COMMUNITY ACTIVITIES

Please list extra-curricular and community involvement during the past three (3) to four (4) years, excluding jobs, in the order of their interest to you. Examples: student government, dramatics, athletics, debating, publications, band, Girl Scouts, 4-H Club, church groups, etc.

ACTIVITY OR ORGANIZATION	YEAR(S) OF PARTICIPATION AND/OR HOURS PER WEEK	POSITIONS/LEADERSHIP ROLES

YOUR FAMILY

PARENT OR GUARDIAN'S NAME:	PARENT OR GUARDIAN'S NAME:
OCCUPATION:	OCCUPATION:
STREET:	STREET:
CITY:	CITY:
STATE:	STATE:
ZIP:	ZIP:
* ANNUAL INCOME \$:	* ANNUAL INCOME \$:

HOW MANY DEPENDENT CHILDREN, INCLUDING YOURSELF, ARE SUPPORTED BY YOUR PARENTS OR GUARDIANS? _____

** Proof of income, i.e. W2 form, last year's tax returns; statement of income from appropriate government agency, employer, verification of homeless status/unemployment or child support, etc. Applications will not be scored without required documentations.*

LETTERS OF RECOMMENDATIONS

Two (2) letters of recommendation with original signature required, one of which must be from a school official.

NAME:	NAME:
TITLE:	TITLE:

VALIDATION FORM

I did receive and fully understand the **Rules, Regulations, and Eligibility Requirements** of the undergraduate scholarship which is for applicants who are pursuing studies in the field of education. I further understand all documentation becomes the property of the National Sorority of Phi Delta Kappa, Incorporated; and, my photo may be used for publication.

APPLICANT'S SIGNATURE:	DATE:
PARENT'S/GUARDIAN'S SIGNATURE:	DATE:

LOCAL SCHOLARSHIP CHAIR NAME:	
LOCAL SCHOLARSHIP CHAIR SIGNATURE:	DATE:
CHAIR EMAIL:	
BASILEUS NAME:	
BASILEUS SIGNATURE:	DATE: