

## **Fort Bend County Alumnae Panhellenic Association Scholarship Information**

### ➤ **ELIGIBILITY**

- Active member in good standing of a National Panhellenic conference sorority.
- Permanent resident of Ft. Bend County at time of graduation, who has graduated from a Ft. Bend ISD, Lamar CISD, Stafford MSD, Needville ISD school; or a resident within these school districts' boundaries who has graduated from a private school or home school.
- Full-time student taking a minimum of 12 semester hours.
- Has demonstrated volunteerism within the community.
- Has demonstrated leadership in her sorority.
- Will have completed 48 hours by the end of spring.

### ➤ **REQUIREMENTS – Submit the following:**

- Provide Fort Bend County alumnae Panhellenic with a transcript.
- Submit a completed application by deadline.
- Provide good contact information.

If chosen as one of the scholarship award recipients, please be prepared to submit a candid 4x6 headshot to be used for publicity purposes.

### ➤ **CRITERIA CONSIDERED**

- Academic achievement.
- Participation/leadership in campus organizations.
- Participation/leadership in sorority activities.
- Participation/leadership in service organizations.

### ➤ **SCHOLARSHIP AWARD**

- The number of scholarships awarded and the dollar amount will be determined based on the applications submitted.
- Scholarship proceeds will be paid directly to the recipient to defray her sorority expenses in the current semester. Date of disbursement will be at the discretion of Fort Bend Panhellenic and following discussion with the sorority advisor and/or chapter officers.
- Scholarship winners will be notified by May 12, 2018.

**DEADLINE FOR APPLICATION, TRANSCRIPT AND ANY SUPPORTING DOCUMENTS THAT YOU WOULD LIKE TO PROVIDE IS A POSTMARK DATE OF SATURDAY, MARCH 17, 2018.**

**FORT BEND COUNTY ALUMNAE PANHELLENIC ASSOCIATION  
SCHOLARSHIP APPLICATION**

**COMPLETED APPLICATION MUST BE POSTMARKED BY MARCH 17, 2018**

**Please print clearly**

Full Name \_\_\_\_\_

NPC Sorority \_\_\_\_\_

College/University \_\_\_\_\_

College Mail Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email  
Address \_\_\_\_\_ Phone \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parents/Guardian Names \_\_\_\_\_

Classification (Spring 2018) Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_

Credit Hours Completed through Fall 2017 Semester/Quarter \_\_\_\_\_

Anticipated Credit Hours Completed End of 2018 Spring Semester/Quarter \_\_\_\_\_

Major \_\_\_\_\_ Minor \_\_\_\_\_

Overall GPA \_\_\_\_\_ Major GPA \_\_\_\_\_

Intended Degree \_\_\_\_\_

Currently Employed \_\_\_\_\_ Yes \_\_\_\_\_ No; If yes, number of work hours per week \_\_\_\_\_

Place of Employment \_\_\_\_\_

Contact Name/Phone \_\_\_\_\_

Estimated sorority dues per semester \_\_\_\_\_ House fees per semester \_\_\_\_\_

For the following, please continue on reverse or attach a separate sheet if needed.

Campus organizations, activities: List offices, committees, leadership posts, internships, honor societies, musical organizations, athletics/athletic support groups, dance, drama, government, etc. and length of affiliation

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Personal Sorority/Panhellenic activities and awards

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Community services and activities: List college and community service organizations/projects and positions, tutoring/volunteer efforts, events, etc. and DATES of INVOLVEMENT

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Mail this completed application with your Fall 2017 transcript, postmarked no later than Saturday, March 17, 2018 to:

**Fort Bend County Alumnae Panhellenic Scholarship  
P.O. Box 2443  
Sugar Land, Texas 77487-2443**

By signing and submitting this scholarship application:

1. I affirm that the information contained herein is accurate and factual to the best of my knowledge.
2. I acknowledge that Fort Bend County Alumnae Panhellenic Association may contact my College Panhellenic, sorority or listed adviser for further information.
3. I acknowledge that all scholarship decisions of the Fort Bend County alumnae Panhellenic Association are final.
4. Should I be selected as the recipient of a scholarship, I give Fort Bend County Alumnae Panhellenic Association the right to use my name and photograph in any publicity regarding the scholarship.

Signature \_\_\_\_\_ Date \_\_\_\_\_