

DESTINED FOR GREATNESS EMERALD SCHOLARSHIP



SCHOLARSHIP APPLICATION

Full Name: Last _____ First _____ M.I. _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Married or Single: _____ # of Children: _____

Are you a citizen of the United States Yes or No? _____

Are you at least 25 years old Yes or No? _____

Have you been convicted of a felony Yes or No? _____

Current Employment

Company: _____ Phone #: _____

Address: _____ Manager: _____

Job Title: _____

Responsibilities: _____

Are you currently enrolled in a university or College? _____

Where? _____

Have you completed 12 hours of college? _____

Where? _____

Military Service

Branch: _____

Rank at Discharge: _____ Type of Discharge: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate, Y/N? _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate Y/N? _____

Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate, Y/N? _____

Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate, Y/N? _____

Degree: _____

Why were you unable to complete your degree?

How will the scholarship assist you financially?

What are your educational goals and plan for success?

Have you applied and been accepted to an accredited college of university for the Fall 2019 semester?

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. If this application leads to a scholarship, I understand that false or misleading information in my application or interview may result in the scholarship being revoked.

All finalist must attend an in-person interview.

Signature: _____ Date: _____

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Print Name: _____

RELATIONSHIP DISCLOSURE STATEMENT

This Disclosure Statement is to determine if the scholarship applicant has a familial relationship with members of Ivy & Pearl Foundation of Dallas (Foundation) or with an outside major contributor of the Foundation. "Major contributor" is defined as a non-member who contributed or bequeathed a total amount of more than \$5,000 to the Foundation. A person with such a relationship shall be disqualified from receiving scholarships.

Please select one:

- The Applicant is not aware of a family relationship to any member of Ivy & Pearl Foundation of Dallas/Alpha Kappa Alpha Sorority, Inc., Alpha Xi Omega Chapter.
- The Applicant is aware of the following blood relationship to the following member of Ivy & Pearl Foundation of Dallas/Alpha Kappa Alpha Sorority, Inc., Alpha Xi Omega Chapter:

I understand by affixing my signature, if I have a familial relationship with a member(s) of Ivy and Pearl Foundation of Dallas, I am not eligible to apply for this scholarship.

Name: _____

Relationship: _____

Applicant Name:

Printed Name

Signature

Date

FOR OFFICIAL USE

Verified By: _____ Date: _____