



# Zeta Phi Beta Sorority, Incorporated

## Psi Beta Zeta Chapter

Post Office Box 442 Southaven, MS 38671 | [SouthavenZetas1920@gmail.com](mailto:SouthavenZetas1920@gmail.com)

Dear Applicant:

The Psi Beta Zeta Chapter of Zeta Phi Beta Sorority, Incorporated is seeking college bound, serious minded graduating high school seniors for scholarship award(s) for the 2018 - 2019 school year.

The purpose of the scholarship is to assist graduating high school seniors in obtaining a college education and to promote Zeta Phi Beta Sorority's scholarship principles.

Applicants must have a minimum 3.0 GPA. An official high school transcript is required and must be presented in a sealed envelope and turned in with the scholarship application. In addition, the applicant must be accepted at an accredited college or university and working in a degreed program of study. The recipient must provide proof of acceptance and enrollment before funds will be awarded.

Accompanying this letter is the scholarship application. All applications must be postmarked by \_\_\_\_\_ and mailed to the following address:

**ZETA PHI BETA SORORITY, INCORPORATED**

Psi Beta Zeta Chapter  
P.O. Box 442  
Southaven, MS 38671  
Please contact Debra B. Sykes for further questions.

Sincerely,

Neffie Gatewood  
Psi Beta Zeta Chapter, President

Debra B. Sykes  
Scholarship Committee Chair



# Zeta Phi Beta Sorority, Incorporated

## Psi Beta Zeta Chapter

Post Office Box 442 Southaven, MS 38671 | SouthavenZetas1920@gmail.com

### SCHOLARSHIP APPLICATION

*(High school seniors attending a Desoto County public, private, or charter school may apply.)*

#### PERSONAL HISTORY

1. Name \_\_\_\_\_ Gender \_\_\_\_\_  
(First) (Middle) (Last)

2. Home Address (Street and Number)

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

Home Telephone ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

3. Date of Birth \_\_\_\_\_ Current Age \_\_\_\_\_

4. High School/College Currently Attending \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Address \_\_\_\_\_

School Counselor \_\_\_\_\_

*(\*This section of application is optional.)*

\*5. Sorority/Fraternity Interest \_\_\_\_\_

\*6. Mother/Guardian \_\_\_\_\_ Father/Guardian \_\_\_\_\_

\*Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

\*7. Sisters: Number \_\_\_\_\_ Ages \_\_\_\_\_ Brothers: Number \_\_\_\_\_ Ages \_\_\_\_\_

\*Siblings Attending College (List Sibling Name, Age, College Name, and Indicate: Fr., Soph., Jr., Sr., Grad. Stud.)

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

**\*FINANCIAL NEED** (*\*This section of application is optional.\**)

List sources and amounts of other financial aid you will receive

(Grants/Fellowships/or Scholarships)

a. \_\_\_\_\_ c. \_\_\_\_\_

b. \_\_\_\_\_ d. \_\_\_\_\_

**WORK EXPERIENCE**

Indicate full-time or part-time positions/jobs held (list most recent or current position first)

Name and Address of Employer and Job Title

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**CLASS STANDING**

1. G.P.A. \_\_\_\_\_ Class Rank \_\_\_\_\_

2. Test Scores

SAT \_\_\_\_\_ ACT \_\_\_\_\_ Other (Specify) \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_

3. Field of Study

What is your intended major/and or minor?

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

If you are undecided, what field of study interests you the most?

\_\_\_\_\_

4. College/University you plan to attend:

\_\_\_\_\_

**Include a copy of your acceptance letter with this application.**

If you have applied to several schools and are still undecided, rank them in order of preference

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**REFERENCES**

Two letters of reference are required. One must be from the High School counselor or teacher, and the second should be from someone in the community (non-resident in household with applicant), such as an employer or pastor. Letters of reference should include a statement about your character. **Letters of Reference should be in a sealed envelope and turned in with application.**

Name / Telephone

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**TRANSCRIPT**

Submit a copy of your latest transcript (high school/college) sealed with your application.

**PERSONAL STATEMENT/ESSAY – Minimum of 500 words**

Provide an essay stating why you should receive this scholarship and how it will help you reach personal, educational, and/or career goals. Please add information highlighting community service activities, leadership roles in organizations, extracurricular school activities, religious activities, and/or hobbies. **Your essay should be correctly developed, neatly typed, double-spaced, and free of grammatical errors.**

**CERTIFICATION**

I certify that all statements and information included on both this application and in supplemental materials are true to the best of my knowledge.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

# DEADLINE: \_\_\_\_\_

Please return the completed application along with all supplemental materials to:

Zeta Phi Beta Sorority, Incorporated  
**Psi Beta Zeta Chapter**  
P. O. Box 442  
Southaven, MS. 38671  
ATTN: Debra B. Sykes, Scholarship Committee Chairperson

## SPECIAL GUIDELINES

1. High school GPA must be at least a 3.0
2. A written notice will be sent to the recipient and the high school by \_\_\_\_\_.
3. The recipient will be formally recognized as the scholarship recipient during an Award's Program/Banquet.
4. All awards will be rendered in the name of the recipient.
5. Recipient should notify Psi Beta Zeta Chapter of Zeta Phi Beta Sorority, Incorporated with proof of enrollment one (1) month prior to entering school to receive the award. The scholarship will be rewarded after receiving proof that the recipient has been accepted in a college or university.
6. Recipient should report academic status in writing at the end of the year to the Sorority.

## CHAPTER USE ONLY:

### PROCESSING INFORMATION

Date Received \_\_\_\_\_ Received By \_\_\_\_\_

	YES	NO
Acceptance Letter	_____	_____
Reference Letter	_____	_____
Transcript	_____	_____
Personal Statement/Essay	_____	_____
Application Complete	_____	_____

Amount of Scholarship \$ \_\_\_\_\_

Academic Year of Scholarship or Period \_\_\_\_\_

Recommendations \_\_\_\_\_

Reviewed by \_\_\_\_\_

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