

The Epsilon Pi Uplift Foundation Scholarship Application



**Omega Psi Phi Fraternity, Inc.
Epsilon Pi Chapter**

APPLICATION PACKET CHECKLIST

- ☐ **Scholarship Application**
- ☐ **Official Transcript**
- ☐ **Copy of your SAT or ACT scores**
- ☐ **Three (3) Recommendations (Forms Attached)**
- ☐ **Typewritten Essay**
- ☐ **Make certain your name is on all attachments**

Epsilon Pi Uplift Foundation, A 501(c) 3 Organization
11 Ridge Road, #400, Brookhaven, PA 19015 • EPIUpliftFoundation@gmail.com

FAMILY DATA

| | Father/Male Guardian | Mother/Female Guardian |
|------------------|----------------------|------------------------|
| Name | | |
| Occupation/Title | | |
| Employer | | |

| | Brothers | Sisters |
|-----------|----------|---------|
| Number of | | |
| Age(s) | | |

SCHOOL COURSES, ACTIVITIES, AND EXPERIENCES

List Advanced Placement (AP), honors courses, and internships you have participated in that are related to your academic or career interest.

| Course of Program | Dates | Grade Earned |
|-------------------|-------|--------------|
| | | |
| | | |
| | | |

List school and community activities in which you have participated, such as varsity and club sports, scouting, church groups, and student government. Include memberships in Honor Society, Beta Club, and volunteer activities.

| Activity | Offices Held | Dates of Participation |
|----------|--------------|------------------------|
| | | |
| | | |
| | | |

List jobs you have held in the past three years.

| Job or Kind of Work | Employer | Year of School | Date(s) of Employment | Hours per Week |
|---------------------|----------|----------------|-----------------------|----------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

All scholarship candidates need three (3) statements of personal recommendations are required to support your application. Utilize the attached forms to complete this portion of the application.

- 4

CERTIFICATION BY SCHOOL OFFICIAL

Please review the student's responses, provide the data requested below, and attach an **official** transcript of grades to this questionnaire.

[illegible]

Test Scores

Admission test scores are required. Instructions for submitting SAT I or ACT scores are printed in each testing program's Registration Bulletin available at your school.

SAT I Test Date **Verbal** **Math**

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| | | | | | |
|------------------------|--|---------------|--|-------------|--|
| SAT I Test Date | | Verbal | | Math | |
|------------------------|--|---------------|--|-------------|--|

ACT Test Date **Composite Score**

ACT Test Date **Composite Score**

Class Rank **out of** **graduating seniors**

Grade Point Average using a scale

Anticipated Graduation date **Month** **Year**

| Name of school official | Title |
|-------------------------|-------|
|-------------------------|-------|

Signature _____ Date _____

FINANCIAL INFORMATION

A. Have you applied for any other financial assistance?

YES_____ NO _____

B. Have you been awarded financial aid or scholarship monies?

YES _____ NO _____

C. Please write any information or special circumstances that you would like the committee consider with your application. For example, communicate any pertinent or unusual circumstances or information concerning your financial need. (You may attach a separate sheet.)

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

PERSONAL ESSAY

Discuss why you applied for this scholarship and why you feel you are a good candidate for the award. Write the essay on a separate sheet of paper and attach to the application.

State your position, defend your answer, most importantly, answer the question.

CERTIFICATION

I affirm that all information given is true, correct and complete to the best of my knowledge. I fully understand that any misrepresentation, incorrect or incomplete information will lead to disqualification for and forfeiture of any scholarship grant. I further understand that funds awarded to me in the form of a scholarship will be disbursed only if I fully comply with all requirements as set forth by the organization. All materials submitted in the application process will remain the property of The Epsilon Pi Uplift Foundation and the Epsilon Pi Chapter of Omega Psi Phi Fraternity, Inc.

Signature of Applicant

Date

Signature of Parent/Guardian (Indicating Review)

PARENTAL COMMENTS:

Please send this completed questionnaire, school transcript, recommendation forms, and a high school profile (if available) and forward to the address below.

**Reginald Springfield
Chairman, Scholarship Committee
11 Ridge Road, #400
Brookhaven, PA 19015**

ALL application materials *must* be received **Friday May 8, 2020.**

Recommendation Form

The Epsilon Pi Uplift Foundation SCHOLARSHIP RECOMMEDATION FORM

TO THE APPLICANT: Complete this portion of the form. Then give the form to one of the individuals who will write a recommendation for you. The Chairman of the Scholarship has provided the address to which the recommendation is to be sent when completed.

NAME OF APPLICANT

SOCIAL SECURITY NUMBER

.....

(Continue on additional sheets if necessary)

Recommender's Name (TYPE OR PRINT)

Signature_____

Date_____

Address_____

Tel. # () _____

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