February 25, 2015

Dear Prospective College Student:

Greetings from the Alpha Kappa Alpha Sorority, Incorporated®, Beta Alpha Omega Chapter. The Beta Alpha Omega Chapter has historically granted more than $20,000 per year in scholarship awards. It is with pleasure that we are now accepting applications for 2015. Additionally, we are excited to announce a special scholarship award for a student who will attend a Historically Black College or University (HBCU).

Please Note: Completed applications must be postmarked no later than April 15, 2015.

ELIGIBILITY CRITERIA

*** Applicants must meet ALL of the requirements below. ***

- African American female
- Currently attending a public, charter, or private high school in Newark, Irvington, or Hillside
- Will pursue a college degree (any major) on a full-time basis during Fall 2015 from a fully accredited college or university
- Cumulative Grade Point Average (GPA) of 2.5 (C+) or higher
- Evidence of excellence in the areas of leadership, scholarship, and community service
- Submit a fully completed application packet by the deadline (details below)
- Mandatory attendance at the Beta Alpha Omega Chapter Scholarship College Empowerment Workshop (details follow):
  - When: Saturday, March 28, 2015
  - Time: 9 a.m. to 5 p.m. (Please be prepared to stay the entire time)
  - Where: Central High School, 246 18th Avenue, Newark, NJ
  - Topics: College Success Strategies, College Life, and Financial Aid
  - What to bring: Students are required to bring all financial aid materials, award letters, and college brochures

APPLICATION PACKET

*** Applicants must submit ALL of the items listed below. ***

1. Completed Student Application Form
2. Personal Statement
3. Answer one of the provided essay questions (Please Note: HBCU scholarship applicants must also answer question #6c)
4. Letter of recommendation from a teacher (someone at your school)
5. Letter of recommendation from another adult (letters from relatives will not be accepted)

POST OFFICE BOX 2069 • NEWARK, NJ 07114
6. Guidance Counselor Recommendation Form
7. Guidance Counselor Recommendation Letter
8. Official High School Transcript and Standardized Test Scores
9. Confidential Financial Statement Form (Please do not attach any tax return statements)
10. Other documents: Financial Statement, Financial Aid Award Letter…e.g. Student Aid Report (SAR), Student Eligibility Notice (SEN)

11. Accept the condition that you must currently attend a public, charter, or private high school in Newark, Irvington, or Hillside school district
12. Accept the condition that there is mandatory attendance at the Beta Alpha Omega Chapter Scholarship College Empowerment Workshop

Completed application packets must be mailed to the following address no later than April 15, 2015:

Alpha Kappa Alpha Sorority, Incorporated ®
Beta Alpha Omega Chapter
ATTN: Scholarship Committee
P.O. Box 2069
Newark, NJ 07114

PLEASE BE ADVISED: INCOMPLETE OR LATE APPLICATIONS WILL NOT BE ACCEPTED UNDER ANY CIRCUMSTANCES.

In closing, thank you for your interest in the Beta Alpha Omega Scholarship. For questions, please feel free to contact Mrs. White at 973-568-2782 or Mrs. Hurley at 973-953-9028. Alternatively, you can send an email to bao.scholarship@gmail.com.

We wish you all the best during your college selection and scholarship application processes!

Sincerely,

Mrs. Roslyn Holmes Grant
President
Beta Alpha Omega Chapter

Mrs. Hazel Estwick-Hurley
Co-Chairman
Scholarship Committee

Mrs. Michelle White
Co-Chairman
Scholarship Committee

Enclosures

A Word about Alpha Kappa Alpha Sorority, Incorporated®, Beta Alpha Omega Chapter...
On January 15, 1908 at Howard University in Washington, D.C., the oldest Greek-lettered organization was established by African American college-educated women. “Service to All Mankind” is the mission of our international service organization. Our sisterhood is comprised of a nucleus of over 265,000 members in over 983 graduate and undergraduate chapters in the United States, the U.S. Virgin Islands, the Caribbean, Canada, Japan, Germany, Korea, and on the continent of Africa. Since 1934, Beta Alpha Omega Chapter has proudly served the communities of Newark, Irvington, and Hillside.
ALPHA KAPPA ALPHA SORORITY, INCORPORATED

BETA ALPHA OMEGA

STUDENT APPLICATION FORM
Deadline: APRIL 15, 2015

Please type or print neatly in black ink.

Name: ________________________________________________________________
   (Last)     (First)     (Middle)

High School: ___________________________________________________________

Home Address: _________________________________________________________
   __________________________________________________________
   __________________________________________________________

Home Telephone Number: ________________________________________________

Cell Telephone Number: ________________________________________________

Date of Birth: ___________________________________________________________
   (Month)   (Day)   (Year)

Email Address: _________________________________________________________

Please list all major school activities in which you have participated:
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
Please list all community service activities you have participated in over the last twelve (12) months and/or community service activities in which you are currently participating:

<table>
<thead>
<tr>
<th>Community Service Project</th>
<th>Your Contribution to the Project</th>
<th>Hours Served/To be Served</th>
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1. Please list any special awards and/or honors you have received and the year received:

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

2. Please state your intended field of study and the reason you chose it:

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
3. Please submit two (2) letters of recommendation from the following: 
   a) A teacher and b) Another adult (letters from relatives will not be accepted)

4. Please submit a personal statement. The statement should include the experiences and opportunities which have had the greatest impact/influence on you. The statement must be typed, single-spaced on a separate sheet of paper, not to exceed two pages.

5. Please select one of the questions below and submit a typed, single-spaced essay response on a separate sheet of paper, not to exceed one page. Please Note: Students applying to an HBCU must also answer question #6c for consideration for the HBCU Scholarship.
   a. Describe the community service project or extra-curricular activity that has greatly influenced or enhanced your life.
   b. Describe how you plan to encourage and inspire younger students to one day further their education and attend college just as you soon will do?
   c. HBCU applicants only – Describe (one page only) what attending a Historically Black College or University (HBCU) means to you.

6. Please request an OFFICIAL HIGH SCHOOL TRANSCRIPT from your guidance counselor. It should include your cumulative grade point average (GPA) up to and including the second semester of your senior year as well as any standardized test scores. Please Note: Applications will not be considered without an official transcript.

APPLICATION DEADLINE: APRIL 15, 2015

Please mail the completed application packet to:

Alpha Kappa Alpha Sorority, Incorporated®
Beta Alpha Omega Chapter
ATTN: Scholarship Committee
P.O. Box 2069
Newark, NJ 07114

For questions, please contact:
Mrs. White at 973-568-2782 or Mrs. Hurley at 973-953-9028
Email: bao.scholarship@gmail.com
GUIDANCE COUNSELOR RECOMMENDATION FORM
Please type or print neatly in black ink.

Student’s Name_______________________________________________________________________
(Last)    (First)   (Middle)

1. Please evaluate the student based on the following criteria using the scale below; 5 being the highest,
1 being the lowest. Please circle the number that is the most applicable.

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<tr>
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<th>Highest</th>
<th>5</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
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<tbody>
<tr>
<td>Academic Performance</td>
<td></td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Intellectual Promise</td>
<td></td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
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<tr>
<td>Leadership</td>
<td></td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
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<tr>
<td>Community Service</td>
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<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
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<tr>
<td>Motivation</td>
<td></td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
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<tr>
<td>Communication/Interpersonal Skills</td>
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<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Presentation</td>
<td></td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
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</table>

Please list three (3) words to describe the student:
____________________________________________________
____________________________________________________
____________________________________________________

2. Please provide a typed recommendation letter on school letterhead giving a candid assessment of the
student’s aptitude and willingness to succeed.

3. The scholarship applicant must provide an OFFICIAL HIGH SCHOOL TRANSCRIPT with the cumulative
grade point average up to and including the second semester grades and standardized test scores to be
included in the application packet.

________________________________________
Guidance Counselor’s Name

________________________________________
Guidance Counselor’s Signature

________________________________________
High School

COMPLETED APPLICATIONS MUST BE POSTMARKED NO LATER THAN APRIL 15, 2015. PLEASE NOTE:
INCOMPLETE OR LATE APPLICATIONS WILL NOT BE ACCEPTED UNDER ANY CIRCUMSTANCES.
CONFIDENTIAL FINANCIAL STATEMENT FORM

Please type or print neatly in black ink.

1. Name:_____________________________________________________________________________
   (Last)    (First)    (Middle)

2. Home Address:______________________________________________________________________
_____________________________________________________________________________________

3. Telephone Number:___________________________________________________________________

4. Parent(s)/Guardian(s):_________________________________________________________________
   (Last)   (First)   (Middle)
   __________________________________________________________
   (Last)   (First)   (Middle)

5. Please itemize your expenses at each college for which you have been accepted or plan to attend:

<table>
<thead>
<tr>
<th>Name of College/University</th>
<th>Acceptance Received</th>
<th>Tuition</th>
<th>Room &amp; Board</th>
<th>Books</th>
<th>Total</th>
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</table>

6. Please list below the amount of money you will receive to finance your college education:

   A. Financial support from family per semester $_______________________
   B. Scholarships from other sources $_______________________
   C. Loans and/or grants (total amount received to date) $_______________________
   D. Earnings from personal employment/savings $_______________________

   TOTAL $_______________________
**APPLICATION CHECKLIST**

(Please include with the completed application form)

<table>
<thead>
<tr>
<th></th>
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<th>Y/N</th>
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<tbody>
<tr>
<td>1</td>
<td>COMPLETED STUDENT APPLICATION FORM</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>PERSONAL PROFILE (Typed, Separate Sheet)</td>
<td></td>
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<tr>
<td>3</td>
<td>ANSWER TO ONE OF THE PROVIDED ESSAY QUESTIONS (Typed, Separate Sheet)</td>
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<td></td>
<td>* HBCU SCHOLARSHIP APPLICANTS MUST ALSO ANSWER ESSAY QUESTION #6c</td>
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<tr>
<td>4</td>
<td>LETTER OF RECOMMENDATION – Teacher</td>
<td></td>
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<tr>
<td>5</td>
<td>LETTER OF RECOMMENDATION – Another Adult (Letters from relatives will not be accepted)</td>
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<tr>
<td>6</td>
<td>GUIDANCE COUNSELOR RECOMMENDATION FORM</td>
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<tr>
<td>7</td>
<td>GUIDANCE COUNSELOR RECOMMENDATION LETTER (Separate Sheet on Official School Letterhead)</td>
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<tr>
<td>8</td>
<td>OFFICIAL HIGH SCHOOL TRANSCRIPT</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>CONFIDENTIAL FINANCIAL STATEMENT FORM (Do not attach any tax return statements with this document. However, if you feel that additional information is needed, then please write a summary on a separate page stating household/other income that will support your education)</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>OTHER DOCUMENTS YOU CAN INCLUDE: Financial Statement, Financial Aid Award Letter…e.g. Student Aid Report (SAR), Student Eligibility Notice (SEN)</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>ACCEPT THE CONDITION: You must currently attend a public, charter, or private high school in Newark, Irvington, or Hillside school district</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Yes, I accept  □ No, I do not accept</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>ACCEPT THE CONDITION: Mandatory attendance at the Beta Alpha Omega Chapter College Empowerment Workshop</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Yes, I accept  □ No, I do not accept</td>
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COMPLETED APPLICATIONS MUST BE POSTMARKED NO LATER THEN APRIL 15, 2015. PLEASE NOTE: INCOMPLETE OR LATE APPLICATIONS WILL NOT BE ACCEPTED UNDER ANY CIRCUMSTANCES.