***Elizabeth Garner Violet T. Lewis***

*Founder Co-Founder*



Gamma Phi Delta Sorority, Inc.

***Mu Omicron Chapter***

***Annual Merit Scholarship***

1. **Purpose**

The purpose of the Mu Omicron Chapter of Gamma Phi Delta Sorority, Inc. scholarship program is to assist graduating high school seniors who have been accepted into an institution of higher learning (two or four year college or university, technical school, secretarial school, or other accredited institution) and/or college students who are currently enrolled in an accredited institution (as previously described), to continue their education. This scholarship is awarded annually.

Students who remain in good standing may reapply for this scholarship annually, provided they are still enrolled in an accredited institution of higher learning.

1. **Eligibility**
   1. Applicant’s permanent home address must be in the Washington Metropolitan Area (DC, MD, and VA) commuting area (50-mile radius).
   2. Applicant is a graduating high school student, a high school graduate, or a student attending an accredited institution (two or four year institution, technical school, business/secretarial school or other equivalent institution) pursuing a certificate, an associate’s degree or a bachelor’s degree.
   3. Regardless of category, applicant must be in good standing.
   4. Individuals pursuing a graduate degree or higher are not eligible.
   5. Academic standing (minimum required GPA of 3.0).
   6. Applicants must be a U.S. citizen.
2. **Application Requirement**

To be considered for this scholarship award, applicants **must** complete an application and return it, by email, to Gamma Phi Delta Sorority, Inc., Mu Omicron Chapter, by **Saturday*, May 18, 2024.*** The application **must** include:

* 1. A completed application form. (Only completed scholarship applications will be considered).
  2. Official high school transcript if applicant is a **high school senior** or a graduate who did not attend college immediately following graduation. The transcript must (1) cite cumulative grade point average, (2) be signed by a school official, and (3) be stamped with the official school transcript.
  3. Alternatively, an official transcript from **post-high school** institution (e.g., two or four year institution, technical school, business/secretarial school or other accredited institution in which applicant is currently enrolled).
  4. Copy of college acceptance letter (if applicant is a high school senior).
  5. Submit one signed, dated and typed academic letter of recommendation from applicant’s current counselor, advisor, or professor on the school’s official letterhead.
  6. Submit one signed, dated, and typed letter of recommendation from a non-academic organization on the organization’s official letterhead verifying the applicant’s community involvement or job-related involvement. Persons writing recommendations should specify relationship or capacity in which he or she knows or has observed the applicant. Unsigned letters will not be accepted and the application package will be deemed incomplete.
  7. Application must be typed, electronically signed, and emailed to the address indicated below.
  8. A typed essay (**150 to maximum 300 words**) that explains your future goals and how college will help you achieve them.
  9. All applicants will be notified by email of final selection by ***Saturday, June 1, 2024.*** Awardee will be contacted by telephone and email.

***All above items as applicable must be submitted before the application will be considered.***

**GAMMA PHI DELTA SORORITY, INC.**

**Mu Omicron Chapter**

**Annual Merit Scholarship Application Form**

# Application Deadline: Emailed by Saturday, May 18, 2024

1. **Amount of Award**

$1,000 (One Thousand Dollars)

1. **Submission of Application Form and Associated Documents**

The application form starting on page 3 is a fillable MS Word file. Fill it out completely electronically, then “Save a Copy”. Note that the application requires a signature. Applicant’s typed name in the signature space will be considered as signature. For the essay you may use the page included in this application form or attach a separate page.

Letters of recommendation should indicate the capacity in which the author knows the applicant, e.g., as a student, employee, or other capacity. In addition, the author should include his/her contact information.

Letters should be signed and mailed to Gamma Phi Delta Sorority, Inc. Mu Omicron Chapter at the mailing address below.

Please email the completed application form, official transcript, Acceptance letter, and two Letters of Recommendation to the following email address below. Please email the application, along with all the required documents together in one package.

[**muomicronscholarship@gmail.com**](mailto:muomicronscholarship@gmail.com)

Questions about the application process may be directed to [muomicronscholarship@gmail.com.](mailto:muomicronscholarship@gmail.com)

**Note: All application materials must be received by email by 11:59 pm *Saturday, May 18, 2024***

**GAMMA PHI DELTA SORORITY, INC.**

**Mu Omicron Chapter**

**Annual Merit Scholarship Application Form**

# Application Deadline: Emailed by Saturday, May 18, 2024

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A. Applicant’s General Information** | | | | | | | | | | | | | | | |
| **Last Name:** | | | | | **First Name:** | | | | | | | | | **Middle:** | |
| **Address:** | | | | | | | | | | | | | | | |
| **City:** | | | | **State:** | | | | | | | **Zip Code:** | | | | |
| **Email Address:** | | | | | | | | | | | | | | | |
| **Birth Date:** | | | | | | | | **Telephone Number:** | | | | | | | |
| **Parent(s) or Guardian(s)** | | **Name:** | | | | | | | | **Relationship:** | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **B. Education Information** | | | | | | | | | | | | | | | |
| **High School Attended:** | **Name:** | | | | | | | | | | | | | | |
| **City:** | | | | | | | | | | | | **State:** | | |
| **Graduation Date (MM/YYYY):** | | | | | | | **GPA:** | | | | | | | **SAT (Optional):** | |
| **College/University Planning To Attend:** | | | **Name:** | | | | | | | | | | | | |
| **City:** | | | | | | | | | **State:** | | | |
| **School/College/University Currently Attending:** | | | | | | **Name:** | | | | | | | | | |
| **City, State:** | | | | | | | | | **Cumulative GPA:** |
| **C. Awards and Honors** | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **D. Extra-curricular activities including school, church or community and indicate your role ( i.e., served as chairperson)** | | | | | | | | | | | | | | | |
| **Activities** | | | | | | | | | **Role** | | | | | | |
|  | | | | | | | | |  | | | | | | |
|  | | | | | | | | |  | | | | | | |
|  | | | | | | | | |  | | | | | | |
|  | | | | | | | | |  | | | | | | |
|  | | | | | | | | |  | | | | | | |
| **E. List summer or part-time employment:** | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |

**GAMMA PHI DELTA SORORITY, INC.**

**Mu Omicron Chapter**

**Annual Merit Scholarship Application Form**

# Application Deadline: Emailed by Saturday, May 18, 2024

**Please write an essay from 150 to 300 words double spaced that addresses the following questions. What are your future goals and how will college facilitate achieving them? Additional paper may be added if necessary. The paragraph *MUST* be typed.**

**Applicant’s Signature Date:**