



Alpha Kappa Alpha Sorority, Inc.

Phi Phi Omega Chapter
Alpharetta, Georgia



BETTYE LEWIS MAYE
Scholarship Application

2010

Name of Applicant _____

PHI PHI OMEGA CHAPTER, ALPHA KAPPA ALPHA SORORITY, INCORPORATED
BETTYE LEWIS MAYE SCHOLARSHIP APPLICATION

The Phi Phi Omega Chapter of Alpha Kappa Alpha Sorority, Inc. is committed to the development of America's youth. In addition to engaging in mentoring, education, health & wellness and economic development programs, we feel it is important to aid in developing talented young Americans in pursuit of higher education. Through gifts provided by our community donors and the contributions from members of Phi Phi Omega, we are pleased to announce the availability of the Bettye Lewis Maye Scholarship. Applications must be typed or printed legibly. We are excited about your interest in applying.

Application Deadline: Monday, April 5, 2010

The Bettye Lewis Maye Scholarship is available to female students. Applicants must meet all the eligibility requirements and deadlines to qualify. A panel interview is required. Scholarship awards must be applied toward tuition, educational equipment, fees and books. Eligibility for all scholarships requires that the applicant:

- Is an African American female resident of North Fulton County, Georgia, or
- A current or past debutante of the Friends for Life/Phi Phi Omega Cotillion Program
- Is a high school senior
- Demonstrates leadership, community involvement and service
- Submits the following documents:
 - Official academic transcript (sealed) from your high school
 - Copy of SAT and/or ACT scores
 - Proof of acceptance at a college or university
 - Two sealed recommendation forms (from a church, high school or community leader that is NOT a relative)
 - Essay on a specified topic
 - Complete application package – incomplete applications will not be considered

In addition to the above criteria, the specific requirements to receive the scholarship are identified below:

| | |
|---|---|
| BETTYE LEWIS MAYE SCHOLARSHIP APPLICATION \$2,000 | <i>Bettye Lewis Maye is a Silver Star member (25 years or more) of the Alpha Kappa Alpha Sorority, Inc. She relocated to Alpharetta, GA from Fairfax, VA in 1996 and upon discovering that no chapter of Alpha Kappa Alpha existed in the North Fulton area, Mrs. Maye and sister sorority members chartered the Phi Phi Omega chapter in 2001. As the organizing President, Mrs. Maye was the impetus behind a signature rite-of-passage event for young, African American high school juniors and seniors --The Alpha Pearls Cotillion. This cotillion continues to be an event of significance throughout the metropolitan Atlanta area; scholarships are provided to many of the participants. In 2006, Phi Phi Omega unanimously agreed to name one of the scholarships being awarded to a high school senior, the Bettye Lewis Maye Scholarship. Mrs. Maye is the mother of a sorority member, Felicia Maye Moment and the wife of Roland H. Maye. She resides in Alpharetta, GA and is a member of the Zion Missionary Baptist Church.</i> |
| <i>Based on academic achievement, high ethical standards, and commitment to pursuing a degree in chosen field of study, community service, school involvement and financial assessment.</i> | |
| <ul style="list-style-type: none">• Community Service• SAT score 1500 or above, ACT score 20 or above• Essay• Community Service• Extra-Curricular Activities• Demonstrated leadership abilities• African American Female High School Senior | |

Name of Applicant _____

PHI PHI OMEGA CHAPTER, ALPHA KAPPA ALPHA SORORITY, INCORPORATED
BETTYE LEWIS MAYE SCHOLARSHIP APPLICATION

APPLICANT INFORMATION

Name: _____
Last First Middle

Home Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Home phone: () _____
mm/dd/yyyy

Cell phone: () _____ Alternate phone: () _____

Email address: _____

Parents' Names: _____

ACADEMIC / COMMUNITY INFORMATION

Name of High School: _____

City: _____ State: _____ Zip Code: _____

Anticipated Date of Graduation

GPA

SAT SCORE

ACT SCORE

List your academic achievements, honors, accomplishments and give the date(s) received.

List school organizations and time commitment.

Name of Applicant _____

PHI PHI OMEGA CHAPTER, ALPHA KAPPA ALPHA SORORITY, INCORPORATED
BETTYE LEWIS MAYE SCHOLARSHIP APPLICATION

COLLEGE INFORMATION

College you plan to attend: _____

City: _____ State: _____ Zip Code: _____

Have you applied? Yes No Have you been accepted? Yes Pending notification

Anticipated major field of study: _____

LEADERSHIP

List and describe your leadership involvement over the past four (4) years.

COMMUNITY SERVICE

List any community service activities in which you have participated.

Name of Applicant _____

PHI PHI OMEGA CHAPTER, ALPHA KAPPA ALPHA SORORITY, INCORPORATED
BETTYE LEWIS MAYE SCHOLARSHIP APPLICATION

MEMBERSHIP

Are you involved in any Alpha Kappa Alpha Sorority program initiatives (i.e. mentoring, educational programs)? Yes No

If yes, list the program and your mentor/facilitator's name and contact information:

Are you a previous Alpha Kappa Alpha Sorority scholarship recipient? Yes No

If yes, what year?

ESSAY

Please attach a 300-500 word essay on one of the following prominent issues (select one and explain its effect on you).

1. Examine stress and its effects on young people today.
2. Summarize the pros and cons of Affirmative Action.
3. Discuss whether or not movies and/or television provide a realistic picture of American living.
4. If you were asked to make a fair evaluation of your teachers, what criteria or standards would you use for the evaluation? Discuss.
5. Have women and men reached gender equality? Defend your argument.
6. Discuss some practical ways in which each of us can help to conserve natural resources.

CAREER GOALS

Tell us about your career goals.

Name of Applicant _____

PHI PHI OMEGA CHAPTER, ALPHA KAPPA ALPHA SORORITY, INCORPORATED
BETTYE LEWIS MAYE SCHOLARSHIP APPLICATION

FINANCIAL INFORMATION

Please describe the basis of your financial need and any extenuating circumstances (e.g. single-parent family).

Anticipated Expenses for the Coming Year

Tuition \$ _____
Transportation \$ _____
Room & Board \$ _____
Books & Supplies \$ _____
Clothing \$ _____
Personal Misc. \$ _____

TOTAL \$ _____

Source of Funds for the Coming Year

Parents \$ _____
Scholarships* \$ _____
Employment \$ _____
Vacation Earnings \$ _____
Applicant Savings \$ _____
Other \$ _____
Other \$ _____

TOTAL \$ _____

** List only scholarship funds you have already been awarded*

If your source of funds for the coming year is not equal to or greater than your anticipated expenses, provide an explanation indicating how you plan to make up the difference.

Complete entire application – incomplete applications will not be considered

Name of Applicant _____

PHI PHI OMEGA CHAPTER, ALPHA KAPPA ALPHA SORORITY, INCORPORATED
BETTYE LEWIS MAYE SCHOLARSHIP APPLICATION

APPLICATION CHECKLIST/CERTIFICATION OF INFORMATION FORM

All applications must be completed in their entirety to be considered for an award. Applications must be typed or printed legibly. Before submitting your application, be sure that the following items in the checklist have been enclosed:

- Completed APPLICATION CHECKLIST and signed CERTIFICATION OF INFORMATION FORM
- One (1) original completed APPLICATION PACKAGE
- One (1) official (sealed) copy of the TRANSCRIPT
- Required typed ESSAY
- Two (2) sealed RECOMMENDATION FORMS as required
- One recent PHOTOGRAPH for use in Phi Phi Omega's publications and announcements
- Ground Rules document with applicant's and parent's signatures

Those applicants meeting the established criteria will be required to participate in a panel interview process.

Phi Phi Omega reserves the right to eliminate any incomplete, unsigned, late or illegible applications.

Certification of Information

By signing below, I certify that the information in this application and any accompanying documents are accurate and complete to the best of my knowledge. If I am selected for a scholarship, I authorize release of biographical information and use of my photograph for use in publicity related to Phi Phi Omega Chapter of Alpha Kappa Alpha Sorority, Inc.

Applicant Signature

Date

**To be considered, your application must be completed and received on or before,
Monday, April 5, 2010 -- mail to:**

Phi Phi Omega Chapter, AKA
Attn: Scholarship Committee
P.O. Box 4012
Alpharetta, Georgia 30005

**If you have any questions, please contact Phi Phi Omega via email:
scholarships@phihiomega.com**

Name of Applicant _____

PHI PHI OMEGA CHAPTER, ALPHA KAPPA ALPHA SORORITY, INCORPORATED
BETTYE LEWIS MAYE SCHOLARSHIP APPLICATION

RECOMMENDATION FORM

Section I – To be completed by Applicant

Name of Applicant _____

Section II – To be completed by a high school, college, church, or community leader who knows the applicant well enough to answer questions about her leadership skills. The person completing this section must not be related to the applicant.

1. How long have you known the applicant? _____ In what capacity have you been acquainted?

2. Please give your personal appraisal of the applicant:

| Category | Excellent | Good | Fair | Poor | Do Not Know |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Scholastic achievement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Community service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Leadership skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Commitment to obtaining a college degree | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Goal setting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Character and personality | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Initiative and drive | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3. What are the characteristics that make you believe this applicant will be a successful college student?

4. Comment on the applicant's judgment, maturity, morals and values.

PLEASE SEAL AND RETURN COMPLETED RECOMMENDATION FORM IN AN ENVELOPE TO THE APPLICANT.

Signature _____ Date _____

Print Name _____ Title _____

School/Organization _____ City _____ State _____

Name of Applicant _____

PHI PHI OMEGA CHAPTER, ALPHA KAPPA ALPHA SORORITY, INCORPORATED
BETTYE LEWIS MAYE SCHOLARSHIP APPLICATION

RECOMMENDATION FORM

Section I – To be completed by Applicant

Name of Applicant _____

Section II – To be completed by a high school, college, church, or community leader who knows the applicant well enough to answer questions about her leadership skills. The person completing this section must not be related to the applicant.

1. How long have you known the applicant? _____ In what capacity have you been acquainted?

2. Please give your personal appraisal of the applicant:

| Category | Excellent | Good | Fair | Poor | Do Not Know |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Scholastic achievement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Community service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Leadership skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Commitment to obtaining a college degree | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Goal setting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Character and personality | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Initiative and drive | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3. What are the characteristics that make you believe this applicant will be a successful college student?

4. Comment on the applicant's judgment and maturity.

PLEASE SEAL AND RETURN COMPLETED RECOMMENDATION FORM IN AN ENVELOPE TO THE APPLICANT.

Signature _____ Date _____

Print Name _____ Title _____

School/Organization _____ City _____ State _____