



**KAPPA ALPHA PSI FRATERNITY, INC.
NEW ROCHELLE-WHITE PLAINS
ALUMNI CHAPTER**



SCHOLARSHIP APPLICATION

The following outline the procedures the applicant will need follow to enter the competition for the scholarships:

1. Complete the application form and return it with a copy of your high school transcript. Also submit letters of recommendation from two teachers.
2. Write a personal letter addressed to the New Rochelle-White Plains Chapter of Kappa Alpha Psi, giving any additional information which will help us to evaluate your qualifications. Include information on leadership ability, vocational plans, ambitions, interests, hobbies, family, etc. If possible, type the letter. Attach the letter to the application form.
3. Mail the completed application to:

**Kappa Alpha Psi Fraternity
c/o James W. Cobb
70 So. Broadway
Tarrytown, NY 10591**

YOUR APPLICATION MUST BE RECEIVED BY APRIL 15, 2006.

ALL APPLICATIONS RECEIVED BY THE SCHOLARSHIP COMMITTEE WILL BE ACKNOWLEDGED BY E-MAIL. IT IS THEREFORE IMPORTANT TO INCLUDE YOUR E-MAIL ADDRESS ON YOUR APPLICATION.

4. The scholarship committee will review all applications and select a group of semifinalists to be interviewed by the committee. Each semifinalist will be notified of the date, place and time for their interview. The scholarship committee has the option of making an award without conducting an interview. However, the student, when invited, is expected to keep the interview appointment.

SCHOLARSHIP APPLICATION

ATTACHED IS THE APPLICATION FOR THE 2006 NEW ROCHELLE-WHITE PLAINS ALUMNI CHAPTER MINORITY SCHOLARSHIP. **THE APPLICATION MUST BE COMPLETED IN FULL AND RECEIVED BY APRIL 15, 2006 TO BE CONSIDERED.**

ACHIEVEMENT AND THE PURSUIT OF EXCELLENCE ARE IMPORTANT IDEAS IN KAPPA ALPHA PSI AND IN KEEPING WITH THOSE IDEAS WE WISH TO CONSIDER CANDIDATES WHO ARE EXAMPLES OF THE FOLLOWING:

- HAVE DEMONSTRATED HIGH ACADEMIC ACHIEVEMENT
- HAVE DISPLAYED ATTRIBUTES WHICH SUGGEST SUCCESS AS A COLLEGE STUDENT AND A SUCCESSFUL LIFE.

THE SCHOLARSHIP COMMITTEE OF OUR CHAPTER IS EMPHATIC ABOUT REJECTING THOSE APPLICATIONS WHICH ARE LATE OR INCOMPLETE. PLEASE MAKE SURE THAT YOUR APPLICATION CONTAINS EVERYTHING THAT IS REQUIRED.

PLEASE NOTE, IF ANY OF THE FOLLOWING REQUESTED ITEMS ARE MISSING YOUR APPLICATION WILL NOT BE CONSIDERED:

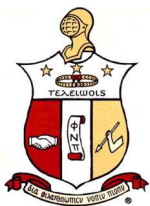
- TRANSCRIPT
- PHOTOGRAPH
- PERSONAL LETTER
- TWO LETTERS OF RECOMMENDATION FROM TEACHERS.

YOU WILL NOT BE CONTACTED AND ASKED TO CORRECT AN INCOMPLETE APPLICATION!!!

Each year, the New Rochelle-White Plains Alumni Chapter of Kappa Alpha Psi, awards scholarships to minority students attending a college/university. **2006 is the tenth year in which we will award scholarships of \$500 each for (4) four consecutive years, as long as the student maintains the scholastic standard which we set. In addition, we will award a \$1,400 scholarship to an African-American male student who wishes to attend Westchester Community College.** Our partnership with WCC will allow an African-American male student to continue his education, post high school, without the stress of tuition concerns. When selecting awardees we will emphasize consideration of academic performance and involvement in both the school community and the community at large. We also consider the financial need of the applicant important.

We intend to complete our selection of awardees by June 1st. To do this we must have all applications in by April 15th. **Applications received after April 15th will not be considered. Applications which are incomplete will not be considered.** Completed applications should be sent to:

Kappa Alpha Psi Fraternity
c/o James W. Cobb
70 South Broadway
Tarrytown, NY 10591



NEW ROCHELLE – WHITE PLAINS ALUMNI CHAPTER
KAPPA ALPHA PSI FRATERNITY, INC.
TRAINING FOR LEADERSHIP SINCE 1911

SCHOLARSHIP APPLICATION

APPLICANT NAME _____ AGE _____
(Last) (First) (Middle)

ADDRESS _____ TELEPHONE _____

CITY _____ STATE _____ ZIP CODE _____

HIGH SCHOOL _____ GRADUATION DATE _____

NAME PARENT(S)/GUARDIAN(S) _____

ADDRESS _____ TELEPHONE _____

CITY _____ STATE _____ ZIP CODE _____

GRADE POINT AVERAGE _____ CLASS RANK _____ EMAIL ADDRESS _____

EXTRA CURRICULAR ACTIVITIES _____

WHAT IS YOUR EDUCATIONAL OBJECTIVE? _____

WHAT SCHOOL(S) ARE YOU CONSIDERING? _____

WHICH HAVE YOU APPLIED FOR ADMISSION? _____

HAVE YOU BEEN ACCEPTED FOR ADMISSION TO YOUR SCHOOL OF CHOICE? YES NO

WHAT FIELD OF STUDY DO YOU PLAN TO PURSUE? _____

WHAT HAVE YOU SAVED TOWARD YOUR COLLEGE EXPENSES? \$ _____

WHAT IS THE TOTAL COST YOU ANTICIPATE FOR YOUR FIRST YEAR? \$ _____

HOW MUCH OUTSIDE FINANCIAL AID DO YOU EXPECT TO RECEIVE? \$ _____

OCCUPATION OF PARENT(S)/GUARDIAN(S) _____

NAMES AND AGES OF BROTHER(S) AND/OR SISTER(S) LIVING AT HOME _____

NAME(S) OF FAMILY MEMBERS WHO ARE IN COLLEGE CURRENTLY AND WILL BE CONCURRENT WITH YOUR ATTENDANCE _____

WHAT SCHOOL(S) ARE THEY CURRENTLY ATTENDING? _____

REFERENCES

LIST THE TEACHERS/GUIDANCE COUNSELORS WHO WILL BE WRITING LETTERS OF RECOMMENDATION TO SUPPORT YOUR APPLICATION. NOTE: THEIR LETTERS MAY BE SUBMITTED WITH YOUR APPLICATION OR SENT DIRECTLY TO THE SCHOLARSHIP COMMITTEE CHAIRMAN. HOWEVER, UNDERSTAND, SUBMISSION DEADLINES APPLY EQUALLY TO THEIR LETTERS. YOU ARE RESPONSIBLE FOR CONTACTING AND ADVISING YOUR REFERENCES.

1. _____

Name	Address	Office Phone ###
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2. _____

Name	Address	Office Phone ###
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PLEASE ATTACH YOUR

SCHOOL (OR SUITABLE)

PHOTO HERE
