



Eta Mu Sigma Chapter Sigma Gamma Rho Sorority, Inc.

P.O. Box 210656

St. Louis, MO 63121

www.SGRho-EtaMuSigma.org

SCHOLARSHIP APPLICATION INSTRUCTIONS

NOTICE TO APPLICANT

Before completing and mailing your application for an Eta Mu Sigma Chapter Sigma Gamma Rho Sorority, Inc. scholarship, please review the eligibility requirements and selection criteria. These requirements refer only to eligibility for applying and do not constitute assurance that you will qualify for a scholarship award. The intent of all applicants must be to obtain a four-year degree.

All information supplied will become the property of Eta Mu Sigma Chapter Sigma Gamma Rho Sorority, Inc..

ELIGIBILITY

1. You must be a high school senior maintaining a scholastic standing in the UPPER THIRD OF YOUR CLASS or must have graduated from high school in the upper third of your class this 2014 – 2015 school year.
2. You must reside in the St. Louis Metropolitan area.
3. You must intend to enter an accredited college during the award year and have met (or have reason to believe you will meet in time for such entrance) all scholastic or other admission requirements of the college of your choice. Mid-year graduates entering college immediately after graduation are also eligible to apply.
4. The committee must receive ON OR BEFORE THE FIRST MONDAY IN APRIL the following:
 - a. completed Eta Mu Sigma Chapter Sigma Gamma Rho Sorority, Inc. scholarship application,
 - b. high school transcript,
 - c. SAT or ACT scores,
 - d. short essay - a paragraph or two as to why you are applying for this scholarship.

Mailing address:

Eta Mu Sigma Chapter
Sigma Gamma Rho Sorority, Inc.
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SELECTION OF SCHOLARSHIP RECIPIENTS

The criteria for evaluation and selection as a scholar are:

- A. SCHOLARSHIP as demonstrated by class standing and grade point average,
- B. SAT/ACT SCORES from the Scholastic Aptitude Test or ACT scores,
- C. LEADERSHIP such as holding elected student office(s) or outside activity leadership position(s) such as Assistant Scout Leader, President of Junior Achievement Club, etc.,
- D. ATHLETIC ABILITY as exemplified by a letter earned in a varsity sport and other outside sports activities,
- E. EXTRACURRICULAR ACTIVITY such as membership in school clubs and other non-athletic activities,
- F. COMMUNITY ACTIVITIES or recognition,
- G. WORK ACTIVITY on a sustained basis for a minimum of 10 hours per week 6 months or more during the school year,
- H. OTHER ACTIVITY not mentioned in above criteria you wish for the committee to consider, and
- I. SHORT ESSAY.



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Eta Mu Sigma Chapter Sigma Gamma Rho Sorority, Inc. Scholarship Application

Personal Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Home Phone: _____ Alternate Phone: _____

Email: _____

Name of High School: _____

Date of Graduation: _____ School Address: _____

- A. Current GPA: _____ of _____ **Example: 3.5 of 4.0**
- Class standing: _____ upper 1% _____ upper 5% _____ upper 10% _____ upper 33 1/3%
- B. SAT Scores: _____ Verbal _____ Math _____ or ACT Score: _____ Composite

Leadership

- C. List student government office(s) held, outside leadership position(s) held, team(s) captained and office(s) held in extracurricular activities.

Athletic Ability

- D. List letter(s) earned in varsity sports and other outside sports activities.

Extra Curricular Activity

- E. List memberships in organizations such as editorial staff or school paper, orchestra, glee club, etc.

TO BE COMPLETED BY HIGH SCHOOL OFFICIAL:

Name of school: _____

Print or type name of official title: _____

Phone number: _____

I hereby certify the information stated in sections A-E above has been verified by me personally using official school records and that I have found it to be correct. Any exceptions have been initialed by me and explained separately.

Signature of Official: _____ Date _____

Community Activity

F. List activities of which you are a member or have recognition from and the length of service.

Work Activity

G. Complete the following for your work activity. Work experience must be verifiable.

Position	Employer	From	To	Hrs/Wk

Other Activity

H. List any other activity or circumstances that you consider of importance that are not covered in the application. Indicate amount of involvement and length of time.

Goals

I. I plan to attend (name of college or university) _____
and major in _____
to become a _____

Parent(s)/Guardian(s)

Name	Address	Home ph	Cell ph

I authorize Eta Mu Sigma Chapter Sigma Gamma Rho Sorority, Inc. to release this scholarship application and all supporting documents to the selection committee members for review.

Signature of Applicant

Signature of Parent/Guardian

Are you interested in receiving information about Sigma Gamma Rho Sorority, Inc.? Y N (circle one)

Do you plan to join a Greek-letter organization? Y N (circle one)

Evaluation

			Maximum Points
A. Scholarship	Class standing	upper 1%	
		upper 5%	
		upper 10%	
		upper 25%	
		upper 33 1/3%	25
B. ACT/SAT Scores		upper 5%	
		upper 10%	
		upper 20%	
		upper 25%	
		upper 33 1/3%	25
C. Leadership			15
D. Athletic Ability/ E. Extracurricular Activity			05
F. Community Activity			15
G. Work Activity			05
Essay			10