



**DISTRICT 9 AHEPA FAMILY
SCHOLARSHIP APPLICATION - 2016**
High School Senior

1. SCHOLARSHIPS

The District 9 AHEPA Family scholarship application is available online by going to www.ahepadistrict9.org and clicking on the tab, PROGRAMS.

Each year, District 9 may award up to seven (7) scholarships to worthy high school seniors. The dollar amount of the scholarship awards varies each year and is subject to the availability of funds.

Current scholarships available are:

1. AHEPA District Scholarship - \$1,000
2. Effie D. Plastiras Award - \$1,000
3. Daughters of Penelope Award - \$1,000
4. Order of AHEPA – Dino Manias Award
5. Three (3) Order of AHEPA Awards

District 9 scholarships are limited to one scholarship per applicant.

2. IMPORTANT: WHAT THE APPLICANT SHOULD KNOW AND MUST DO

- a. Eligibility requirements:
 - a. Is a graduating high school senior from within AHEPA District 9 (Maine, New Hampshire and Vermont)
 - b. Is an active member of any order within the AHEPA Family (AHEPAN, Daughter of Penelope, Sons of Pericles or Maids of Athena), **OR**
 - c. Is a child or grandchild of an active member of the Order of AHEPA or Daughters of Penelope. An active member is defined as a member in good standing in their respective Chapter for a minimum of two (2) years.
- b. Applicant must complete the District 9 scholarship application in full.
- c. Applicant must have a Grade Point Average (GPA) of at least 3.2 **or** must be ranked in the upper **25%** of their class.
- d. Application **must** include a college letter of acceptance.
- e. The application **must** be endorsed by the respective Chapter President or Secretary, verifying either his/her membership or that of a parent or grandparent.
- f. Applicant **must** have the application endorsed by the high school principal or guidance counselor, verifying class size, class rank, and/or grade point average (GPA).

- g. Applicant **must** attach an essay of not more than five hundred (500) words, stating '*what it means to you to receive an AHEPA Family Scholarship*'.
- h. Applicant **must** submit an **official sealed** copy of their high school transcript that includes SAT and/or ACT scores, and include GPA and GPA scale based on a 4.0 equivalent.
- i. **Application must be mailed and postmarked by April 15.** If postmarked after **April 15**, it will be disqualified. Hand delivered applications will be disqualified.

Applications not meeting **all** of the above criteria will be disqualified by the scholarship committee.

The completed application must be mailed to one of the District #9 Scholarship Chairpersons. No application will be opened until the Scholarship Committee convenes to review said applications.

Order of AHEPA

Mr. Richard J. Rizza
AHEPA Scholarship Chairperson
22 St. Cyr Drive
Hampton, NH 03842

Daughters of Penelope

Victoria Kallan
DOP Scholarship Chairperson
21 Danbury Drive
Merrimack, NH 03054

The selection of the scholarship recipients will be made solely by the District 9 Scholarship Committee. All information on the scholarship applications shall be confidential and shall be respected and recognized as such by the District 9 AHEPA Family Scholarship Committee.

All applicants will be notified **in writing** of the decision by the Scholarship Committee. All decisions made by the committee will be final based upon the information that was submitted by the applicant.

(RESERVED FOR FUTURE USE)

3. PERSONAL INFORMATION

Name _____
Last First Middle Sex

Permanent (Home) Address

Number and Street

City or Town County State ZIP Code

Permanent Phone (____) _____
Area Code Number

Indicate who is a member of the AHEPA Family

Myself _____ Parent(s) _____ Grandparent(s) _____

Check all that apply: _____ AHEPA _____ DOP _____ Sons of Pericles _____ Maids of Athena

Chapter No. _____ City _____ State _____ Membership No. _____

4. EDUCATIONAL INFORMATION

Name and address of college/university you plan to attend full time for fall of 2016 semester

Area(s) of academic concentration/major _____ or undecided _____

Possible career or professional plans _____ or undecided _____

School you now attend _____

5. ACADEMIC HONORS

Please list all academic honors that you have received and from whom. Attach additional sheets if necessary.

6. ATHLETIC HONORS

Please list all athletic honors that you have received. Attach additional sheets if necessary.

7. WORK EXPERIENCE

Please list all jobs (including summer employment) you have held during the past three years.

**8. EXTRA-CURRICULAR, SCHOOL AND VOLUNTEER COMMUNITY ACTIVITIES
(including summer)**

Please list the activities you were involved in at high school, college, and community. Attach additional sheets if necessary.

8. EXTRA-CURRICULAR - Continued

9. CHURCH YOUTH ACTIVITIES

List your participation in any church activity during the past three years and give name and city of church, including time and duration.

10. ESSAY

Please submit an essay on *'what it means to you to receive an AHEPA Family Scholarship'* - not to exceed **five hundred (500)** words.

11. SIGNATURES AND ENDORSEMENTS

We hereby certify that the information in this application for consideration by the District 9 AHEPA Family Scholarship Committee and submitted documentation is true and correct to the best of our knowledge and belief and that the applicant meets all of the eligibility requirements.

Applicant Signature	Parent/Guardian Signature	Date
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12. LOCAL CHAPTER ENDORSEMENT

As President/Secretary of Chapter # _____

Chapter Name	City and State
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I hereby endorse this application and verify the active AHEPA Family membership as stated in Section #2a of this application. **(The active member must be in good standing within their respect Chapter for a minimum of two (2) years.)**

Name	Title	Date
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13. HIGH SCHOOL PRINCIPAL/GUIDANCE COUNSELOR ENDORSEMENT

In regards to the foregoing application of _____

I certify that the following information is correct as of this date.

Class Size	Class Rank	Grade Point Average
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Name	Title	Date
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