



## **OMEGA SCHOLARSHIP APPLICATION**

Omega Psi Phi Fraternity Inc. - Epsilon Xi Chapter and Epsilon Xi Youth Educational Foundation Inc., and will be awarding two (2) scholarships to High School seniors graduating in 2018. These scholarships are intended for students of African American decent who have not only achieved academically, but have demonstrated a well-rounded High School career both at school and in the community.

Attached is the scholarship application packet, which includes the application form and requirements for applying. Please distribute this packet to all qualifying students at your school. All applications are due by Monday, **April 16, 2018**. Please contact me at (916) 402-0058 if you have any questions.

Sincerely,

**Eugene D. Jones I**

Eugene D. Jones I  
Scholarship Chairman

2 Attachments:

Scholarship Requirements and Check-off List  
Scholarship Application





## **SCHOLARSHIP REQUIREMENTS & CHECK-OFF LIST**

Please submit the required attachments in the order listed below and write each number (1 – 4) in the upper right hand corner of each document.

No.	Document	Check
1	Application	
2	Reason Essay	
3	Reflection Essay	
4	Recent transcript in a sealed envelope from the school	

### Reason Essay

- Why you deserve this scholarship?

### Reflection Essay

- With the success of the movie Black Panther, how and why is it important to have representation? In what ways can organizations do more to increase exposure of positive social, educational, and professional black images?

Essays must be typed on 8 ½ x 11-inch paper and not exceed one page in length. Header should include your full name, current high school and intended college. Essays will be judged on content, context, grammar and overall structure.

### DEADLINE

**Applications must be received by Monday, April 16, 2018**

Send applications to:

Omega Psi Phi Fraternity Inc. Epsilon Xi Chapter & Epsilon Xi Youth Educational  
Foundation Inc.

### **Scholarship Award**

P.O. Box 188765 Sacramento, CA 95818-8765





## SCHOLARSHIP APPLICATION

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
First MI Last

Address: \_\_\_\_\_  
Number Street City State Zip

Telephone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

High School: \_\_\_\_\_

Grade Point Average (GPA): \_\_\_\_\_

College you plan to attend:  
\_\_\_\_\_

Colleges to which you have been accepted:  
\_\_\_\_\_  
\_\_\_\_\_

Please list extracurricular school and community activities:  
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