



Department of Athletics, Chris Atsaves, Supreme Athletic Director
Order of AHEPA, 1909 Q Street, N.W., Suite 500, Washington, D.C. 20009, 202-232-6300

2026 Nomination Form for AHEPA Scholar-Athlete SCHOLARSHIP

- (1) Complete the **SCHOLAR-ATHLETE** Application (available on the AHEPA website).
- (2) Submit: (a) GPA Transcript; (b) SAT/ACT Results; (c) 2 Letters of Recommendation; (d) 2 Recent Photos (Head Shot and Action Shot)

The Committee will determine the appropriate scholarship to grant, from an applicant's credentials and qualifications, if selected. Therefore, it is not necessary to apply for a specifically named scholarship. Please submit this page along with the Application and the required information, as noted above.

Presentations for scholarships to selected students will be held at the Annual Supreme Convention (July 26 – 31, 2026) Athletic Awards Luncheon. The availability of the candidate to attend the Awards Luncheon is not a condition of selection. The 2026 Convention will be at the Sheraton Philadelphia Hotel in downtown Philadelphia, PA and the AHEPA Athletics Awards Luncheon is tentatively scheduled for Wednesday, July 29, 2026.

Completed applications to be e-mailed with subject line AHEPA Scholar-Athletes, Last Name, First Name to: jamur10@yahoo.com

NOMINATION BY AHEPAN

I Nominate: _____

Address: _____

City, State & Zip: _____

Phone: _____ E-mail: _____

Parents' Name(s) _____

Their Contact Information: _____

Nominating Member's Name: _____

Address: _____

City, State & Zip: _____

Phone: _____ E-mail: _____

I am a Member of the AHEPA Family & Chapter # _____ Location: _____

Date: _____

Deadline for application, including all required documents, is April 15, 2026



Department of Athletics, Chris Atsaves, Supreme Athletic Director
Order of AHEPA, 1909 Q Street, N.W., Suite 500, Washington, D.C. 20009, 202-232-6300

Scholar – Athlete Scholarship Application

Name of Applicant: _____

Parents' Name: _____

Mailing Address: _____

High School or College Name: _____

High School or College Address: _____

Social Security number: (mandatory) _____

Applicant's Unweighted GPA (most recent, maximum 4.0 scale) _____

Applicant's Cumulative GPA _____

SAT Score _____ / ACT Score _____

********(Please provide most recent Transcript & 2 letters of recommendation)********

A nominated student must have a connection/nexus with a member of the AHEPA Family.

My connection with AHEPA: (Please check one or more):

_____ I am an AHEPAN/DAUGHTER _____ My Grandmother is a DAUGHTER

_____ My father is an AHEPAN _____ I am a SONS OF PERICLES

_____ My mother is a DAUGHTER _____ I am a MAIDS OF ATHENA

_____ My Grandfather is an AHEPAN

Please supply name of the above relative and Member, and Chapter # _____

Member/Relative ID Number (mandatory) _____ Membership dues paid through: ____/ ____/ ____

(Member/Relative must be paid up on dues and in good standing with AHEPA)

CERTIFICATION: I HEREBY CERTIFY THAT THE INFORMATION I HAVE PROVIDED IS COMPLETE AND CORRECT, AND I UNDERSTAND THAT THE SUBMISSION OF FALSE INFORMATION MAY RESULT IN THE REJECTION OF MY APPLICATION OR THE REVOCATION OF ANY GRANT.

SIGNATURE OF APPLICANT

DATE



Department of Athletics, Chris Atsaves, Supreme Athletic Director
Order of AHEPA, 1909 Q Street, N.W., Suite 500, Washington, D.C. 20009, 202-232-6300

ATTACH PHOTO
(Space Reserved for Applicant's Head shot)

ATTACH PHOTO
(Space reserved for Applicant's Action Shot)

List your Top 4 Athletic Awards or Achievements and your top 4 Academic and/or Community Service Awards or Achievements:

Academic/Community Service
Awards/Achievements:

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Athletic Awards/Achievements:

- 1) _____
- 2) _____
- 3) _____
- 4) _____

(A moderate number of attachments, newspaper articles, or brief personal essay are allowed)

Completed applications to be e-mailed with subject line AHEPA Scholar-Athletes, Last Name, First Name to: jamur10@yahoo.com



Department of Athletics, Chris Atsaves, Supreme Athletic Director
Order of AHEPA, 1909 Q Street, N.W., Suite 500, Washington, D.C. 20009, 202-232-6300

SUPPLEMENT TO THE ORDER OF AHEPA SCHOLAR-ATHLETE APPLICATION

This supplement seeks details and specifics regarding your individual and team efforts and accomplishments in athletics at your current level, be it high school or college.

Please provide details and specifics as to the following:

1. Quantify your athletic accomplishments ("statistics"): EXAMPLES:
 - a. For basketball: points per game, rebounds per game, assist per game (season and career): _____
 - b. For soccer/lacrosse: goals per game, assists per game (season/career): _____
 - c. For football: yards gained rushing, passing or receiving (season/career): _____
 - d. For baseball: batting average, homeruns/rbi's (season/career): _____

For sports not mentioned above, to the extent possible, provide statistics for both the most recent season and career:

The Committee recognizes that certain sports or certain positions within a sport (example, a football offensive lineman), may not be as susceptible to quantification or the providing of statistics, and the Selection Committee will fairly evaluate any information provided herein.

2. What athletic honors have you received? _____
 - a. How many years as a starter: _____
 - b. Post-season recognitions: _____
 - All-League: _____
 - All-Conference: _____
 - All-State; and Any honorifics for athletics (example: Senior Class Most Outstanding Athlete): _____

3. Team success: _____
 - a. Team records: _____
 - b. Team success: _____



Department of Athletics, Chris Atsaves, Supreme Athletic Director
Order of AHEPA, 1909 Q Street, N.W., Suite 500, Washington, D.C. 20009, 202-232-6300

Conference Championships; and District or State Championships: _____

For the above questions, if you have played multiple sports, please indicate as to each sport: _____

As noted in the application, please feel free to provide copies of any newspaper articles, All-District, All-Conference or All-State Championships listings, to the extent applicable.

Applicant's Name: _____

Signature: _____ Date: _____