



AHEPA-DAUGHTERS OF PENELOPE DISTRICT 12 FOUNDATION, INC.

2025 SCHOLARSHIP APPLICATION FORM

SCHOLARSHIP OPTIONS:			
High School Graduating Senior Colle	lege Undergraduate	Vocational Other	Specify
PERSONAL INFORMATION:			
Name:			
Male Female Date of Birth:		Cell Phone	Required
eMail		Required	
Have you received an AHEPA-Daughters of Penelope District	t 12 Foundation Scholarship	before? YES	NO
If yes, what year?			
ACADEMIC/EDUCATIONAL INFORMATION:			
High School/College Name:			Cumulative GPA:
Address of School:			
NOTE: IF THE SPACE BELOW IS NOT SUFFICIENT, YOU MAY ATTA	ACH A SEPARATE PAGE AND I	REFER TO THE APPROPRIATE	SECTION A, B OR C.
SECTION A – List any sports, extracurricular or community sen			
220 TOTAL 2131 GITY SPOTES, EXTRACORPORATE OF COMMISSION, SECTION OF COMMISSION OF COMMISSION OF COMMISSION OF COMMISSION OF COMMISSION OF COMMISSION OF COMISSION OF COMMISSION OF COMMISSIO	Tice you have paricipaled		
SECTION B - What special recognitions have you received for	r excellence in school (hono	ors, awards, scholarships, e	tc.):
SECTION C - Please list any internships or jobs (including sum	nmer employment) you have	held:	
State the name and address of the college, university, techni	ical, trade, or vocational scl	nool you are and/or will be	attending:
			-
Vocation, or major area, you intend to pursue in school:			
		5	

NOTE: If you are applying for a Past Grand President Kathy Bizoukas Women's Leadership Scholarship you must submit a separate and complete application package email.