SAMPLE Psi Psi International Scholarship Application

This sample application can be printed and submitted to your Chapter for their use in determining the best Chapter candidate to apply for Tri Psi Scholarship. The link to the online application is provided on the Scholarship page located at www.tripsisorority.com website.

This application is for a \$1,000.00 Scholarship. I certify that I am a Delta Delta Delta student in good standing and will be entering my third year of college in the Fall and that I will have a minimum of 60 hours, maximum of 72 hours on the semester system (or I will have a minimum of 80 hours and a maximum of 102 hours on the quarter system) by the beginning of my third year.

Name:	Date/F	Place of birth			
Home Address:	City:	State: Zip:			
University /College Attending	<u>;</u> :	Major Field of Study:			
Overall GPA:	Based	Based on possible GPA			
Parent's Marital Status: M	D/S W Home Phone	2:			
Email:					
Occupation: Father:	Mother:	Age of siblings:			
Number of siblings in college	next year, including yourself:				
Do you work during the scho	ol year? Y / N How many ho	ours a week?			
Do you work during the sum	mer? Y / N How many hours	s a week?			
Is your mother a member of	Psi Psi Psi Sorority (mothers of Tri I	Delta)? Y / N			
PLEASE BE	EADVISED — THE ONLINE APPLICA	ATION WILL REQUIRE THE FOLLOWING:			
	outlining your educational & career (w/amounts Scholarships, loans &	er goals, Tri Delta Activities/Offices, Community Servic & grants).			
2. EVALUATION from your	Γri Delta Advisor.				
3. OFFICIAL TRANSCRIPT of	your entire College career, throug	şh your last full semester.			
Signature:		date:			
Delta Delta Chapter		University:			

Only one application per Tri Delta Chapter accepted.

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Advisor Check-off

Applicants Name:			
Delta Delta Chapter:			
Tri Delta Advisor:			
Based on your relationship with applicant,	please rate the fol	lowing by circling the ap	opropriate response.
	Strong	Very Strong	<u>Exceptional</u>
1 Ambition and Goals	1	2	3
2 Leadership quality/potential	1	2	3
3 Campus and Chapter Involvement	1	2	3
4 Compassion and Respect for Sisters	1	2	3
5 Personal Character	1	2	3
AFFIDAVIT			
I certify that the applicant is a member-in-good-standing of			pter of Delta Delta Delta.
Signature of Advisor:		Dat	۰

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