Epsilon Beta Foundation



Scholarship Application Packet

EPSILON BETA FOUNDATION SCHOLARSHIP APPLICATION

Epsilon Beta Foundation Scholarship:

The brothers of Epsilon Beta Chapter of the Omega Psi Phi Fraternity, Inc. take pride in supporting this program. In doing so, the Epsilon Beta Foundation will be awarding one \$500.00 scholarship to a deserving student that attends Western Illinois University. Students interested in competing for this scholarship must provide the following information to the scholarship committee by **February 28**, **2021**.

- 1. WIU transcript
- 2. Two letters of recommendation- one from a counselor and/or professor and one from a community organization
- 3. Completed scholarship application
- 4. Signed and dated certification statement
- 5. One-page, double spaced, type written essay on either of the following questions:
 - What do you hope to achieve in your personal and professional life after college?
 - Who has had the greatest impact on your life?

The Epsilon Beta Foundation Scholarship Committee will make the selection of awardees based on:

- A minimum GPA of 3.0
- The quality of your essay
- Extracurricular activities (e.g., leadership and professional organizations, academic organizations, honorary organizations, etc.)
- Community involvement (volunteering, mentoring, church, etc.)

Inquiries and/or questions may be directed to the Scholarship Committee at info@epsilonebetafoundation.org.

EPSILON BETA FOUNDATION SCHOLARSHIP APPLICATION

CERTIFICATION STATEMENT

| NAME (print) | |
|--|---|
| I understand that withholding information rec knowingly giving false information will make : Epsilon Beta Foundation. I certify that the sta are correct and complete to the best of my kno | me ineligible for assistance from the tements I have made on this application |
| Signature Applicant | Date |
| (This form MUST be signed and included with yo | ur complete scholarship application) |

APPLICANT INFORMATION

| (Please type or print legibly): | | |
|---|---------------------------|------------------|
| NAME | | |
| ADDRESS | | |
| City | State | Z ip Code |
| Date of birth | Mobile number | |
| Email address | | |
| Preferred method of contact (check | one) mobile phone e | email |
| Grade point Avg | | |
| Extracurricular activities (include le honor/awards. | adership positions, commu | nity service and |
| | | |
| | | |

Incomplete applications or applications submitted after the deadline, **February 28**, **2021**, will not be considered. The completed application packet <u>must</u> be emailed to the following address and postmarked by the deadline date.

 $\underline{info@epsilon beta foundation.org}$

Attn: Scholarship Committee