

Epsilon Beta Foundation

Scholarship Application Packet



Epsilon Beta Foundation NFP,

The Epsilon Beta Foundation was established to enhance and improve educational and professional opportunities for underserved youth. Our mission is to offer financial assistance, counseling, mentoring and create professional relationships to improve their chances for future success.

Epsilon Beta Foundation NFP takes pride in supporting today's youth. In doing so, the Epsilon Beta Foundation will be awarding several \$1,000.00 scholarships to college bound high school seniors. Students interested in competing for the academic scholarships must provide the following information to the scholarship committee by April 30th.

- ❖ A high school transcript.
- ❖ Two letters of recommendation. One from a counselor and/or teacher and one from a community organization.
- ❖ A completed scholarship application.
- ❖ Letter of acceptance from college or University
- ❖ A signed and dated certification statement.
- ❖ A one-page double spaced type written essay on one of the following topics:
 - **What do you hope to achieve in your personal and professional life after college?**
 - **Who has had the greatest impact on your life and why?**

Incomplete applications or applications submitted after the April 30th deadline, will not be considered. The completed application packet must be emailed to the following address by the deadline date.

info@EpsilonBetaFoundatrion.org

Attn: Scholarship Committee



SELECTION CRITERIA

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

- Solid or exceptional GPA.
- ACT score of 18 or higher.
- Strong communication skills.
- Special skills and abilities.
- Strong commitment to pursue a college education.
- Positive self-concept, motivation, and Desire to succeed.
Community involvement.

Inquiries and/or questions may be directed to info@epsilonbetafoundation.org



Epsilon Beta Foundation
Scholarship Application

CERTIFICATION

NAME (print) _____
Applicant

I understand that withholding information requested on this application or knowingly giving false information will make me ineligible for a scholarship from the Epsilon Beta Foundation. I certify that the statements I have made on this application are correct and complete to the best of my knowledge.

SIGNATURE _____
Applicant

NAME (print) _____
Parent/Guardian

SIGNATURE _____
Parent/Guardian

This form **MUST** be signed and included with your complete scholarship application.

Epsilon Beta Foundation
Scholarship Application

(Please type or print legibly)

Applicant Information:

Last Name	First Name	Middle Initial
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Address: _____
Street Apt.

Address: _____
City State Zip Code

Home phone number: _____ Cell number: _____

Date of Birth: _____ Email Address: _____

Name of High School: _____

Grade Point Avg. _____ ACT Composite Score _____ SAT Score _____

Class Rank _____

Extracurricular Activities (include leadership positions, community service and honor/awards):

Applicant Name _____

Name of Colleges/Universities that you are interested in:	Have you applied? Yes or no?	Have you been accepted? Yes or no? If yes, please attach acceptance letter.

Have you received other scholarships? Yes or no? If yes, please list all other scholarships and amounts.

Application deadline is April 30th

Please return the completed application packet to:

Epsilon Beta Foundation
Attention: Scholarship Committee
info@EpsilonBetaFoundation.org