



**The Mid-Eastern Region of Eta Phi Beta Sorority, Inc.
Epsilon Beta Chapter
Educational Scholarship Program**

Award: Subject to availability of funds, up to \$500 may be awarded for the school year

Eligibility Requirements

- Currently a graduating high school senior or a post-secondary student
- High school or post-secondary grade point average of 2.5 or above unweighted GPA
- Currently a resident of the South Carolina regional area, including the Midlands area, of the Epsilon Beta Chapter of Eta Phi Beta Sorority, Inc.
- Admitted to or enrolled in an accredited college or university at the time of application. Proof of admission/enrollment must be submitted with this application. Both full-time and part-time students are eligible for nomination.
- Former or current participants in an Eta Phi Beta sponsored program or organization may receive preference. Applicants may reapply annually.

Scholarship Award Application: Applicants **must** submit the following information for scholarship consideration:

- Completed application form
- High school and/or any post-secondary school transcripts
- Two letters of reference from persons who are not relatives of the candidate. The letters should address the suitability of the candidate for the award, nature of the relationship with the candidate and length of time of the relationship. Letters must come from two of the following three:
 - Letter from an academic advisor, academic counselor or recent instructor.
 - Letter from a leader of a church or community service organization with which the applicant is associated.
 - Letter may come from a supervisor at a job or volunteer position, or any personal reference of the applicant's choosing.

***Please submit all of the above items in a single envelope to the Epsilon Beta Chapter of Eta Phi Beta Sorority, Inc. Submissions should be sent to:
President Harriett Shepherd, 449 Indigo Ridge Drive, Columbia, SC 29229. **Deadline:**
June 1, 2020***

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(Please Print or Type Clearly)

I. Personal Information

A. Contact information

Name: _____

E-mail (if applicable): _____

Address: _____

Home Phone: _____ Mobile Phone: _____

B. Other Contact (Parent, other family or friend, etc. who will know how to contact you if the above information changes)

Name: _____

E-mail (if applicable) _____

Address: _____

Home Phone: _____ Mobile Phone: _____

II. Educational Background

Name	Address	Dates Attended	Date of Graduation
High School			
College			
Vocational School			

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III. Future Education Plans

A. Schools Applied To

1st Choice: _____

Address: _____

Accepted yet: yes / no / pending

2nd Choice: _____

Address: _____

Accepted yet: yes / no / pending

3rd Choice: _____

Address: _____

Accepted yet: yes / no / pending

Proposed course of study/major: _____

Full-time or part-time status: Full-time_____ Part-time_____

B. In the space provided, please describe your future school and career plans:

C. On a separate page, please explain why you should be rewarded this scholarship and what value it would bring to you.

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IV. Employment and Volunteer History

A. Current Employer

Employer	Address	Contact Name	Telephone Number	Dates Worked	Hours Per Week

B. Other Employment, Volunteer or Relevant Experience

Employer	Address	Contact Name	Telephone Number	Dates Worked	Hours Per Week

C. In the space provided or on a separate page, please provide other extracurricular activities you have participated in and honor programs and awards you have received.

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VI. Eta Phi Beta Sorority, Inc. Programs (not required)

A. If you have participated in an Eta Phi Beta sponsored program and/or youth organization, please list them here.

Program	Dates Participated
_____	_____
_____	_____
_____	_____
_____	_____

VII. Mid-Eastern Region Scholarship Information

A. Please indicate how you learned about Epsilon Beta Chapter scholarship awards: _____

B. Have you received an Epsilon Beta Chapter scholarship award in the past? If yes, list the year and the amount of the award:

I certify that the information provided in this application is complete and accurate.

Name (Please print) **Signature** **Date**

Signature of Parent or Guardian if applicant is under 18 years of age **Date**

Thank you for completing the Mid Eastern Region Epsilon Beta Chapter Scholarship Application. The members of the Mid-Eastern Region Epsilon Beta Chapter of Eta Phi Beta Sorority, Inc. share a vision of a community in which the attainment of experience, knowledge, and leadership skills is promoted and supported.