

IOTA PHI LAMBDA SORORITY, INC.

DORETHERA N. HORNBUCKLE MEMORIAL SCHOLARSHIP

MRS. LOLA M. PARKER
FOUNDER



The Office of
National President Elect

STATEMENT OF ACCEPTANCE

I understand that I am the recipient of the \$_____ Dorethea N. Hornbuckle Memorial Scholarship offered by Iota Phi Lambda Sorority, Incorporated and that it is a one time award.

I understand that as the recipient of the award stipulated that I will enter college in August/September of 20____. I will be allowed up to one year to begin using this award, August or September 20____, at the latest.

I will major either in the field of Business, a related Business Career or be enrolled in a university, college or school of business.

I understand that the scholarship award will be sent directly to the college or university after I have submitted to the Office of the National President Elect the official document of my enrollment and a schedule of my classes at the college/university.

I understand that I must return this **Statement of Acceptance** after notification of receipt of the scholarship and with the official documents above. If there is no response, the award will be forfeited.

Date _____
Signature of Awardee

Social Security Number _____ College ID Number

Name of College or University