



ET Diego M. Jones Memorial Scholarship Application

ELIGIBILITY REQUIREMENTS

Applicants must be a male or female graduating high school senior with minimum of 3.0 GPA. They must be a member of the ET FIL organization

- The college selected by the scholarship recipient must be an accredited institution.
- The scholarship recipients must provide proof of enrollment before funds are allocated.
- The applicant must provide a photo and signed photo release.

DOCUMENTS TO BE SUBMITTED

Please submit the following with your completed application:

- Scholarship Registration Form signed by applicant and parent/legal guardian if under the age of 18.
- Student Application signed by applicant and parent/legal guardian if under the age of 18.
- A current official/certified academic transcript.
- Two letters of recommendation
- A 300-500 word autobiographical essay that includes how your involvement in the FIL Auxiliary has influenced your life, career aspirations, leadership experiences, and significant achievements.
- Family income documentation (Copy of first page of the most recent IRS 1040 or IRS Tax Return Transcript, please redact Social Security Number)
- Supporting Documentation
- Business/professional photograph

The Diego M. Jones Memorial Scholarship applications are to be emailed to epsilon_tau@yahoo.com by **February 1**. Open to male and female ET FIL. Local Prize is \$1,000. Book scholarships can be awarded dependent on the number of students. All FIL applications are forwarded to the National Contest. The National Prize is tiered for first, second, and third place rankings. Use the information below to complete the consent form in this application.

Sponsoring Chapter: Epsilon Tau Chapter
Region: Southwestern
Chapter President: Ján Harbert Email: iota.etpres@gmail.com
Chapter Scholarship Chair Michelle Peace Email: epsilon_tau@yahoo.com

IOTA PHI LAMBDA SORORITY, INC.
FUTURE IOTA LEADERS SCHOLARSHIP
INFORMATION SHEET

Iota Phi Lambda Sorority, Inc. is proud to offer a one-time \$7,000.00-tiered Future Iota Leaders Scholarship. This scholarship offers financial support and is awarded to three (3) deserving FIL, a high school senior, who will pursue a degree in a business-related field of study. The scholarship is for one year and will be sent directly to the college or university which he/she attends.

Judging criteria will include academic performance/achievement, career aspirations, demonstrated leadership, and financial need. A committee of non-partisan judges will judge all applications. All decisions of the judges are final. Sponsoring chapters must submit electronically applications to the National President-Elect by **February 28**.

These scholarships are available through submission from local chapters only. **A chapter may submit multiple applicants.**

- Tiered Scholarship, **1st Place - \$3,500.00, 2nd Place - \$2,000.00, 3rd Place - \$1,500.00**, will be awarded annually. Awards are sent to the selected college or university to be applied to the recipient's tuition.
- Applicants must be a male or female graduating high school senior with minimum of 3.0 GPA.
- The college selected by the scholarship recipient must be an accredited institution.
- The scholarship recipients will be officially notified in May by the National President-Elect.
- The scholarship recipients must provide proof of enrollment before funds are allocated.
- The applicant must provide a photo and signed photo release.
- Each chapter must electronically submit the completed Application Packet to the National President-Elect by **February 28**.

The Application Packet **must** include the following:

- Scholarship Consent Form signed by applicant and parent/legal guardian if under the age of 18.
- Student Application signed by applicant and parent/legal guardian if under the age of 18.
- A current official/certified academic transcript.
- Three letters of recommendation
- A 300-500 word autobiographical essay that includes how your involvement in the FIL Auxiliary has influenced your life, career aspirations, leadership experiences, and significant achievements.
- Family income documentation (Copy of first page of the most recent IRS 1040 or IRS Tax Return Transcript, **please redact Social Security Number**)
- Supporting Documentation
- Business/professional photograph

IOTA PHI LAMBDA SORORITY, INC.
FREDDA WITHERSPOON NATIONAL SCHOLASTIC SCHOLARSHIP
CONSENT FORM

Applicant's Name _____

Applicant's Address _____

City _____ State _____ Zip _____

High School Attending _____ Location _____

Sponsoring Chapter _____ Region _____

Chapter President _____ Email Address _____

Chapter Scholarship Chair _____ Email Address _____

SCHOLARSHIP APPLICANT SHOULD READ AND SIGN THE FOLLOWING: I understand that:

- I must attend a college or university and major in a related field of business.
- If I am the selected scholarship recipient, all awarded funds are sent to the selected college or university and applied directly to my tuition after I have submitted the official document of my enrollment along with a schedule of my classes.
- The scholarship is a one-time award.
- I must provide a business/professional photograph.
- Any questions I have regarding the contest may be answered by the Chapter sponsoring me.
- I have read the above items and understand the requirements.

Applicant's Signature _____ Date _____

Parent/Legal Guardian's Signature _____ Date _____

IOTA PHI LAMBDA SORORITY, INC.
FUTURE IOTA LEADERS SCHOLARSHIP
STUDENT APPLICATION

PERSONAL DATA

Applicant's Name _____

Applicant's Address _____

City _____ State _____ Zip _____

Phone Number _____ Email Address _____

Father's Name _____ Occupation _____

Check box if deceased

Father's Address _____

City _____ State _____ Zip _____

Mother's Name _____ Occupation _____

Check box if deceased

Mother's Address _____

City _____ State _____ Zip _____

Non-Parent/Guardian's Name _____ Occupation _____

Check box if deceased

Non-Parent/Guardian's Address _____

City _____ State _____ Zip _____

FAMILY SIZE

Number of people in your home (including yourself) _____

FAMILY INCOME

Annual Household Income: less than \$10,000 \$10,000 - \$20,000 \$21,000 - \$35,000
 \$36,000 - \$50,000 \$51,000 - \$65,000 more than \$65,000

SCHOOL DATA & TEST SCORES

High School _____

Address _____

City _____ State _____ Zip _____

Cumulative GPA include scale _____ Class Rank _____ Class Size _____

Dates of High School Attendance _____ Expected Graduation Date _____

SAT Total Score _____ SAT Reading _____ SAT Math _____ SAT Writing _____

Date Taken _____

ACT Score _____ Date Taken _____

Planned College/University _____

Planned College Major _____

SCHOOL ACTIVITIES

List all extracurricular activities in which you have been involved (academic clubs, student council, band/arts, athletics) within the past four years. Submit documentation (photos, clippings, letters, certificates, etc.) for all activities. **NOTE: Only include 4-5 sources of documentation.**

HONORS & ACADEMIC AWARDS

List all honors (academic and extracurricular) and other distinctions received and submit documentation (photos, clippings, letters, certificates, etc.) for all activities. **NOTE: Only include 4-5 sources of documentation.**

COMMUNITY SERVICE

List all community service activities in which you have been involved (FIL, food pantry, Girl or Boy Scouts, church ministry, youth organizations, etc.) within the past four years. Submit documentation (photos, clippings, letters, certificates, etc.) for all activities. **NOTE: Only include 4-5 sources of documentation.**

WORK/VOLUNTEER EXPERIENCE

List your work/volunteer experience (any job you have held). List type of work, employer, dates of employment, and hours/week. **NOTE: Only include 4-5 sources of documentation.**

LIFE INFLUENCE

Who has been most influential in your life? What impact have they made?

RECOMMENDATIONS

List the name, title, address, and telephone number of the **FIL Advisor** who will submit a letter of recommendation for you. The letter can be submitted to you by email or by paper copy.

Name _____ Title _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Email _____

List the name, title, address, and telephone number of the **teacher, counselor, or school staff** who will submit a letter of recommendation for you. The letter can be submitted to you by email or by paper copy.

Name _____ Title _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Email _____

List the name, title, address, and telephone number of the **personal** reference (clergy, community leader, or employer) who will submit a letter of recommendation for you. The letter can be submitted to you by email or by paper copy.

Name _____ Title _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Email _____

PERSONAL STATEMENT/ESSAY

Attach a double-spaced typed essay (300-500 words) autobiographical essay addressing the following:

- How your involvement in the FIL Auxiliary has influenced your life.
- Your career aspirations.
- Your most significant leadership experiences.
- Your most significant achievements.

The decisions of the judges are final.

APPLICATION CHECKLIST

- Scholarship Consent Form, signed
- Student Application, signed
- Current official/certified transcript
- Letters (3) of recommendation
- Personal statement/essay
- Family income documentation (redact Social Security Number)
- Documentation that supports activities and accomplishments
- Business/professional photograph

DISCLOSURE

The information provided in this form will be disclosed only to Iota Phi Lambda Sorority, Inc. as required to determine your eligibility for an award. All the information will be properly disposed of according to the Record Retention/Disposition Policy of Iota Phi Lambda Sorority, Inc. after award of the scholarship has been made.

I hereby certify that all information provided is accurate and true to the best of my knowledge. I understand that any false information may disqualify me from consideration. I grant Iota Phi Lambda Sorority, Inc. permission to publish my name, picture, and image in connection with the promotion of scholarship.

Applicant's Signature _____ Date _____

Parent/Legal Guardian's Signature _____ Date _____

IOTA PHI LAMBDA SORORITY, INC.
FUTURE IOTA LEADERS SCHOLARSHIP
STUDENT RATING SHEET

Applicant's Name _____

Sponsoring Chapter _____ Region _____

CRITERIA AND RATING SCALE

| Category | Possible Points | Applicant's Score |
|-----------------------------|-----------------|-------------------|
| Family Size | 40 | |
| Family Income | 60 | |
| Grade Point Average | 50 | |
| Test Scores | 120 | |
| School Activities* | 25 | |
| Honors and Awards* | 25 | |
| Community Service* | 25 | |
| Work/Volunteer Experience* | 25 | |
| Essay | 80 | |
| Packet Presentation** | 50 | |
| Total Possible Score | 500 | |
| Applicant's Score | | |

*NOTE: Only include 4-5 sources of documentation.

**Packet Presentation score includes the organized appearance of the packet, and all the items listed under Application Checklist.

Evaluator _____

Date _____

Comments _____