

AHEPA Family Firwood District No. 22

The Northwest AHEPA Family Educational Foundation



SCHOLARSHIP APPLICATION PACKET

The Northwest AHEPA Family Educational Foundation is a non-profit, IRS-approved organization interested in promoting and assisting the educational endeavors of AHEPA Family Students.

The Foundation awards scholarships to students on the basis of academic performance, community involvement, and/or financial need.

Our contribution to the educational advancement of our recipients will provide us with tomorrow's community leaders who will continue to disseminate the Hellenic heritage and culture to future generations.

For information on eligibility, other requirements, etc., see last page of this packet.

The completed application packet MUST BE POSTMARKED BY APRIL 15, otherwise it will not be considered.

When completed, it should be mailed to:

**NW AHEPA Family Educational Foundation
c/o St. Nicholas Greek Orthodox Church
1523 South Yakima Avenue
Tacoma, WA 98405-4460**

CHECKLIST FOR APPLICATION PACKET

(All the items must be typed, except as noted.)

This Application Form, completed and signed by the Applicant.

Official transcript from present school.

For Applicants presently attending High School, this means the transcript for grades 9, 10, 11 and the first half of grade 12. For all others, this means an official transcript for all relevant work up to last completed quarter or semester.

Letter of Recommendation.

(Provided by the Applicant's principal, counselor, teacher, professor or employer.)

Applicant's Personal Letter.

A personal letter, either typed or hand written, where the Applicant discusses his/hers ideals and goals, and the significance of participation in school, civic, church, community, and AHEPA Family activities.

Letter of Acceptance to college or university or technical or vocational school.

For Applicants who will be attending a different institution next year, a photocopy of the letter of acceptance from the institution,

Or check here if you will be attending the same institution

Completed and signed AHEPA Family Eligibility Verification Form.

A blank form is provided at the end of this packet.

Check one:

Applicant is a Member.

Applicant is related to Endorsing Member.

Applicant's Photograph.

Applicant's recent photograph, suitable for publication. Please try for a size 2" x 2", "half-tone". Please write name of Applicant on photograph's back. Photographs will not be returned.

The Northwest AHEPA Family Educational Foundation

SCHOLARSHIP APPLICATION FORM

A. APPLICANT’S INFORMATION

- 1. Applicant’s full name: _____
- 2. Social Security Number: _____
- 3. Permanent Address: _____
(city, state, zip) _____
- 4. Telephone at that address: _____ 5. Other Tel.: _____
- 6. Email address *(optional)*: _____
- 7. Birth Place: _____ 8. Birth Date: _____
- 9. Is Applicant a U.S. citizen? Yes No

B. APPLICANT’S FAMILY INFORMATION

- 1. Is father living? Yes No 2. Is mother living? Yes No
- 3. Name of living father, mother, or guardian: _____
- 4. Address of person in 3: _____
(city, state, zip) _____
- 5. Telephone at that address: _____ 6. Other Tel.: _____
- 7. Father’s occupation: _____ 7. Mother’s occupation: _____
- 8. Names and ages of brothers and sisters:
- a. _____ c. _____
- b. _____ d. _____

C. APPLICANT'S ACADEMIC STATUS

1. Name of High School: _____

2. Address of High School: _____

(city, state, zip) _____

3. Year of graduation (past or expected): _____

4. When did you enter College, University or Technical School or expect to enter? _____

5. Are you a college graduate? Yes No
If Yes, year of graduation: _____ Degree earned: _____

6. If you are presently enrolled in a College or University, what is your current status?
 Freshman Sophomore Junior Senior Post-Graduate

7. Name of College attending: _____

8. Financial Aid Office Address: _____

(city, state, zip) _____

9. Your cumulative Grade Point Average (and maximum) is: (*enter only for the one attending:*)

a. High School: _____

b. College: _____

c. Post Graduate: _____

10. What vocation or field of study do you expect to follow?

D. APPLICANT’S SCHOOL ACTIVITIES, HONORS AND AWARDS

1. List special recognitions, awards, honors and scholarships for excellence in academic work:

2. List the extracurricular activities in which you participated, and any offices and positions of leadership held:

3. List special recognition you have received for excellence in extracurricular activities:

(Use additional pages as needed.)

E. APPLICANT’S INVOLVEMENT AND ACTIVITIES WITH AHEPA FAMILY, GREEK AND CIVIC COMMUNITIES

1. With AHEPA Family:

2. With Greek Community:

3. With Civic Community:

(Use additional pages as needed.)

G. APPLICANT’S REFERENCES

Provide the names, addresses and telephone numbers of three (3) individuals that have not been listed elsewhere in this application (e.g. teachers, parish priest, business references, etc.)

1. (Name:) _____

(Profession, Tel. No. :) _____

(Address:) _____

(City, State, Zip) _____

2. (Name:) _____

(Profession, Tel. No. :) _____

(Address:) _____

(City, State, Zip) _____

3. (Name:) _____

(Profession, Tel. No. :) _____

(Address:) _____

(City, State, Zip) _____

H. APPLICANT’S CERTIFICATION

I hereby certify that all information on this form is true and complete to the best of my knowledge. I understand that, if requested by an official of the Educational Foundation, I agree to give proof of the information I have included in this form. I understand that failure to do so may result in my disqualification for financial aid.

Applicant’s signature: _____

Date: _____

(You may separate this page from the rest of the application packet, as long as you submit it together along with your other application materials.)

**HAVE THIS FORM COMPLETED AND SIGNED BY:
THE PRESIDENT, VICE PRESIDENT, SECRETARY OR TREASURER OF THE
ENDORING CHAPTER OF AHEPA, DAUGHTERS OF PENELOPE, SONS OF
PERICLES OR MAIDS OF ATHENA.**

VERIFICATION OF ELIGIBILITY FORM

By my signature below, I (name) _____ hereby certify that

I am (check one): President Vice President Secretary Treasurer

Of (check one): AHEPA DOP SOP MOA

Chapter No: _____ Chapter located in (City, State) _____

I also certify that (Member's Name) _____ is a member in good standing of the above listed Chapter.

I also certify that (Applicant's Name) _____ is a child of, or under legal guardianship by the above mentioned Endorsing Member.

Signed on this _____ day of _____, 200__

(Signature:) _____

(Tear out this page. Do not mail it with the completed application packet.)

AHEPA FAMILY FIRWOOD DISTRICT NO. 22 EDUCATIONAL FOUNDATION

For General Information visit the “AFEF Scholarships” link at: <http://www.ahepad22.org/>

AHEPA Family Firwood District 22 has created its own Educational Foundation, a Washington State IRS-approved Non Profit Organization, and does business as Northwest Educational Foundation.

Each year, AHEPA Family District 22 elects new Board Members for a 3-year term.

The Educational Foundation awards scholarships annually to members of the AHEPA Family, and to qualified members of their families.

Qualified for scholarship are those individuals who are eligible, and meet other qualifications.

An eligible individual is someone who:

- (1) Has been inducted either in AHEPA, or in the Daughters of Penelope, or in the Sons of Pericles, or in the Maids of Athena in any one of the Chapters of District 22, at least one year prior to the date of applying for a scholarship; or
- (2) Is a child of, or under legal guardianship by an Endorsing Member, who is eligible under paragraph (1) above.

In addition, the Applicant must meet the following qualifications:

- (1) Be presently enrolled in either High School as a senior, or in college, graduate or technical or vocational school;
- (2) Intend to attend an accredited college or university for an undergraduate or graduate program starting in the next school year, or vocational or technical school, for which the scholarship would apply;
- (3) Complete all requirements of the application process, as indicated on the application form.
- (4) The number of scholarship awards have a lifetime maximum for each applicant. Individuals are qualified to receive a maximum of two (2) undergraduate scholarships and one (1) graduate scholarship.

The Applicants must submit this application packet and related documentation by April 15th.

The Educational Foundation will accept all submitted scholarship applications, and keep them confidential. The scholarship applications are reviewed by independent volunteer educators. Applicants who meet best the award criteria will be awarded the scholarships.

The Educational Foundation uses the following award criteria:

- a. Academic achievement.
- b. School activities, Honors and Awards.
- c. AHEPA Family, Greek Community and other Civic Activities.
- d. Financial need, only for those who desire to be considered for additional scholarship funding, and submit the required supplemental information for evaluation.

For all other questions, call Chairman John Spathas: (503) 287-3909, drjohnspa1@msn.com
All Awards are presented at the Annual District 22 Convention, which is usually held in June.
(For information visit the AHEPA District 22 website at: <http://www.ahepad22.org>).

Recipients are strongly encouraged to attend the Award Ceremony.