Dear Prospective High School Graduate,

The Omicron Upsilon Lambda chapter of Alpha Phi Alpha, Fraternity, Inc. Educational Foundation is pleased to announce the foundation’s scholarship award. The scholarship is open to all graduating black male seniors attending an accredited high school or resides within Palm Beach County, Florida. Scholarship amounts may vary and will be determined by the Board of Directors. To be considered for a scholarship, the student MUST be accepted as a full-time freshman for the upcoming Fall term of an accredited college or university. The scholarship will be based on individual financial need, academic achievement, extracurricular activities, and participation in community service.

The following guidelines must be adhered to:

❖ Completing all portions of the application.
❖ Attaching all requested information to the application.
   o Official high school transcript
   o A typed personal statement
   o Two letters of recommendation
   o College acceptance letter (If applicable)

Please note: All information submitted with your application is subject to verification. Any information found to be false or misleading will nullify your application.

DEADLINE: March 31, 2020

ALL APPLICATIONS MUST BE SUBMITTED BY MAIL AND RECEIVED NO LATER THAN THE DEADLINE DATE TO:

Omicron Upsilon Lambda Chapter of Alpha Phi Alpha Fraternity, Inc.
Attention: Scholarship Committee
P. O. Box 7862
Delray Beach, FL 33482
Date: _________________

**Personal information** (please print legibly)

Name: ______________________________________________________________________________________________________

(Last) (First) (Middle)

Home Address: __________________________________________________________________________________________________

(Street Address) (Apartment)

_________________________________________ ___________________________ __________________________
City State Zip Code

Date of Birth: ___________ Email Address: ________________________________________________

Phone: Home: ___________ Mobile: ___________

Mother/Guardian's Name: ____________________________ Occupation: ________________

(Last) (First)

Address: __________________________________________________________________________

(Street No.) City State Zip

Phone: Home: ___________ Mobile: ___________

Father/Guardian's Name: ____________________________ Occupation: ________________

(Last) (First)

Address: __________________________________________________________________________

(Street No.) City State Zip

Phone: Home: ___________ Mobile: ___________

Students Lives with: 
☐ Both Parents ☐ Mother
☐ Father ☐ Guardian

**High School Information**

Name of High School: ____________________________ High School Cumulative GPA: ________

Expected Graduation Date: ___________ SAT Score: ________ ACT Score: ________
Letters of Recommendation:

Please note: Two letters of recommendation are required. Letters should be from faculty (Teacher, Guidance Counselor, Assistant Principal, or Principal) members of your school. All letters are to be sealed and submitted with the application.

Personal Statement:

Please write an essay of your choice using no fewer than 300 words and no more 750 words. Essays should be typed using a word processor and submitted with the application.

College Information

Institution of higher education you will be attending: ____________________________________________________

Have you been accepted: □ Yes □ No  Intended major: ________________________________

Total cost of tuition: ______________  Expected date of enrollment: ____________________________

Educational objectives: ________________________________________________________________

Awards and Service

Hours of community service: __________ (documentation maybe requested)

List school and community awards, scholarships, honors, and activities: ______________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

The signatures below indicate that all information contained in this application is complete, factually correct, and honestly presented.

___________________________________________  ______________________
Applicant Signature  Date

___________________________________________  ______________________
Parent/Guardian Signature  Date