

Tri Kappa Academic Scholarship

About the Donor

For over 50 years, the Alpha Pi Chapter of Kappa Kappa Kappa has recognized and awarded students for their academic achievements.

Eligibility Criteria

This scholarship is a one-time award to a graduating senior from **DeKalb High School**, (DeKalb County, Indiana) pursuing any field of study.

Applicant must also:

- Rank in the top 10% of your graduating class during both junior and senior year
- Have clearly stated goals and objectives
- Have actively participated in school, community and volunteer activities
- Be highly motivated to attend and succeed in college
- Be a resident of DeKalb County, Indiana
- Enroll, or intends to enroll, full-time in a post-secondary educational institution

Required Forms

- Scholarship Cover Page
- Completed Application
- Essay
- Two (2) Letters of Recommendation from teachers

Review

A volunteer committee will review the material submitted.

Interview

An interview may be a part of the selection process.

Deadline to Apply

Deadline is January 31st. Please submit your application and required documents to Program@CFDeKalb.org.

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Cover Page

Last Name _____ First Name _____ M.I. _____

High School _____

All information provided is kept confidential to protect your privacy.

Release of Records/Disclosure Agreement

I grant permission for the high school guidance office to release a copy of my transcript to the individual or group responsible for awarding this scholarship.

I certify that all information given in every part of this application is true. I understand that falsification of information may result in termination of any scholarship awarded.

Student signature

Parent/guardian signature

Date

Date

APPLICANT INFORMATION

Last Name: _____ First Name: _____ Middle: _____
Permanent Address: _____ Phone: _____
City: _____ State: _____ Zip: _____ Date of Birth: _____
E-mail Address: _____ (mm/dd/yyyy)
High School: _____ Graduation Year _____
DeKalb County, Indiana Resident: _____ Gender: _____

FAMILY INFORMATION

Name of father, stepfather or guardian: _____
Address: _____
City: _____ State: _____ Zip: _____
Occupation: _____ Employer: _____
Name of mother, stepmother or guardian: _____
Address: _____
City: _____ State: _____ Zip: _____
Occupation: _____ Employer: _____
Ages of other children in your family: _____ # of family members in college: _____

COLLEGE INFORMATION

Year in college (upcoming academic year): _____
College or University attending: _____
City and State of School: _____ Full-time Part-time
Major field of study: _____
If part-time, # of credit hrs per sem.

CAREER GOALS

Write a brief statement describing your career goals in the space below

Last Name:

First Name:

SCHOOL ACTIVITIES

List your extracurricular activities in the order of importance to you.

Activity	Grade Participated (9,10,11,12)	Role or Leadership Position Held

AWARDS AND HONORS

List any awards and honors you have received during high school.

Award or Honor Received	Grade	Criteria Award Based On

COMMUNITY SERVICE

These volunteer services must have taken place outside of school hours. You may submit this list as a separate document.

Organization	Grade	Description of Services	Hours (Total or per week)

EMPLOYMENT AND INTERNSHIPS

List your work and/or intern experience beginning with the most recent position.

Organization	Type of Work	Dates Employed or Internship	Hours (Total or per week)

ESSAY

Last Name _____ First Name _____

Write your essay in the space provided below. The margins, font and font size are set and should not be changed.

Write an essay (200 words or less) explaining why you chose the college you selected, how it will be good for you and your career goals, and where you see yourself in the next five years.

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Letter of Recommendation Form

Applicant Information

Complete the section below on the computer before submitting to your selected individual. Choose whether you want the letter to be returned to you or someone else, such as a guidance counselor, by checking the appropriate box.

Last Name: _____ First Name: _____ Middle: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Recommendation Requested From: _____ Phone: _____

Relationship to you (ie: coach, counselor): _____

Return to: Applicant _____ By Date: _____

The above named student is applying for a scholarship and is requesting a letter of recommendation from you. This reference of personal character provides the scholarship committee with a more in-depth perspective of the applicant. Please take a few minutes to truly reflect on the applicant and include any information you feel would be beneficial to know.

If you are unable to complete this letter by the deadline, please notify the applicant so that he/she may secure another reference.

When providing a letter of recommendation:

1. Please type your letter on a separate sheet of paper and attach this form.
2. Please incorporate the following topics in your letter:
 - Compare this student to others you have known.
 - Describe the qualities and characteristics you feel set this student apart from others.
 - Describe any special circumstances you feel are relevant.