

AHEPA & DAUGHTERS OF PENELOPE (DOP)
YANKEE DISTRICT #7 SCHOLARSHIP APPLICATION & INSTRUCTIONS

1. Eligibility:

- A. Applicant must be currently attending college or postgraduate school and plan to enroll as a full-time matriculated student in the next academic year.
- B. Applicant must have a **GPA of 3.0 or higher**.
- C. Applicant must either be a member or child of a member in good standing of his or her chapter. A member is defined as being in good standing if all financial obligations to his or her Chapter have been paid in full.
- D. Applicant or parent/guardian must have become a member of the AHEPA Family organization prior to **December 31, 2018**.
- E. Applicant is eligible to receive a maximum of **three** AHEPA District #7 scholarships in consecutive years.

2. Filing:

- A. All information requested must be submitted on time for the application to be considered complete. Incomplete or late applications will be disqualified and not considered for a scholarship.
- B. All information submitted will be held in strict confidence. Only the scholarship committee will review this information, and it will not be returned.
- C. Only information requested will be considered. Letters of recommendation or testimonials are not required and will not be reviewed.

3. Procedure:

- A. The completed application must be typed out or legibly printed.
- B. A **sealed and stamped official transcript** of the most recently attended academic institution must be sent either by the academic institution directly to the Scholarship Co-Chair, or submitted with the other required parts of the application. Unofficial transcripts will not be accepted. **It is strongly recommended that applicants submit transcript requests well before proceeding with other steps of the application process.**
- C. Applicants must provide a five-paragraph essay (typed) on **one** of the following topics:
 - i. The first two letters of the acronym "AHEPA" stand for "American" and "Hellenic." Explain what you think it means to be a Greek-American in the 21st Century and how your heritage has impacted your life.
 - ii. The third and fourth letters of "AHEPA" stand for "Educational" and "Progressive." Explain how your educational path has affected your personal progress as an individual.
 - iii. The Greek philosopher Thales once wrote, "The most difficult thing in life is to know yourself." Analyze the meaning of this statement and explain the steps you have taken to know yourself better as a young adult.
- D. All completed materials must be **postmarked by April 15, 2019, and sent to the receiving co-chairs listed below. Please do not staple materials together, or send by UPS.** You may also choose to scan completed applications and essays and send to the Co-Chairs by email, by the deadline of April 15, 2019.

AHEPA:	Peter Patsouris	DOP:	Nikitoula Menounos
	52 Williams Street		129 Burnham Road
	Norwich, CT 06360		Lebanon, CT 06249
	ppatsouris@threeivers.edu		nikitoula.menounos@ct.gov

4. Awards:

Scholarships will be awarded at an AHEPA/DOP District #7 Scholarship Banquet, to be held on **Sunday, June 23, 2018, at the Holy Trinity Greek Orthodox Church in Norwich, CT**. Recipients will be notified and invited as honored guests of District #7. **Scholarship winners or parents/guardians are expected to attend the banquet to receive their awards.**

PLEASE DIRECT ALL QUESTIONS TO CO-CHAIRS

Peter Patsouris at 860-884-7772 (AHEPA) or Nikitoula Menounos at 860-465-6848 (DOP)

AHEPA/DOP 2019 YANKEE DISTRICT #7 SCHOLARSHIP APPLICATION

NAME: _____ ADDRESS: _____

CITY: _____ STATE: ___ ZIP CODE: _____

HOME TELEPHONE NUMBER: _____ CELL PHONE NUMBER: _____

E-MAIL ADDRESS: _____

NAME OF THE COLLEGE OR UNIVERSITY APPLICANT IS ATTENDING DURING THE 2018-19 ACADEMIC YEAR:

APPLICANT'S ACADEMIC INFORMATION FOR 2019-2020 SCHOOL YEAR

SOPHOMORE ___ JUNIOR ___ SENIOR ___ GRADUATE STUDENT ___

NAME OF THE COLLEGE OR UNIVERSITY APPLICANT WILL BE ATTENDING IN SEPTEMBER 2018:

LOCATION: _____

APPLICANT'S CURRENT MAJOR OR ULTIMATE CAREER GOAL: _____

LIST ANY ACTIVITIES, ACCOMPLISHMENTS, COMMUNITY INVOLVEMENT, SERVICE ORGANIZATIONS

DATES OF ACTIVITY DESCRIPTION

(Attach additional pages if required)

VERIFICATION OF ELIGIBILITY

I hereby certify that _____ (applicant or applicant's parent/guardian)
has been a paid up member in good standing of Chapter # _____ prior to December 31, 2018, located in the
city of _____ in the state of _____.

SIGNED _____

Chapter President

Chapter Number

Date