

ZETA PHI BETA SORORITY, INC.

DELTA GAMMA ZETA CHAPTER

Shades of Blue Scholarship 2013

If you are currently a High School junior or senior and have plans to further your education after graduation the *Delta Gamma Zeta Alumnae Chapter of Zeta Phi Beta Sorority, Incorporated* is offering an opportunity to help finance your goal.

Applications are now being accepted.

For more information and to obtain an application visit our website at www.deltagammazeta.org
or email us at shadesofblue@deltagammazeta.org.



APPLICATION DEADLINE IS FRIDAY, JUNE 7, 2013



Zeta Phi Beta Sorority, Incorporated

Delta Gamma Zeta Chapter

A Community Conscious, Action Oriented Organization

Shades of Blue Scholarship Application

Recognition Award:

Recognition will be given to current Phoenix Metropolitan area teacher with tenure and full-time status.

**Number of awards and amounts vary based on the number of qualified applicants.

APPLICATION REQUIREMENTS

- Must be a U.S. citizen or permanent resident.
- Must be a Full-time student in a Phoenix Metropolitan school at time of application
- Must submit a one page typed biography essay on an assigned topic
- Must submit two (2) letters of recommendation
- **Finalists will be required to:**
 - Participate in the [Shades of Blue](#) Scholarship event to be held on Saturday, September 2013
 - Prepare a speech for the awards event

Procedures/Instructions:

The completed application and all materials **must** be submitted to the Phoenix Chapter of Zeta Phi Beta Sorority, Inc. **on or before June 7, 2013.**

All application materials should be submitted by the due date using one of the below methods (mailed packets **must** be postmarked **June 7, 2013**):

Email: Shadesofblue@deltagamzeta.org

US Mail: Zeta Phi Beta Sorority, Incorporated
Delta Gamma Zeta Chapter
[Shades of Blue](#) Scholarship Committee
PO Box 26760
Tempe, AZ 85285-6760

To be considered, all application packets **must** include the following:

- **Scholarship Application**
- **Official Academic Transcript** (Must be the most recent official transcript)
- **Signed Recommendation Wavier Form**
- **Two (2) letters of recommendation** (High School Teacher, Coach, or Instructor)
- **A 1 page essay to include:**
 - Typed, double-spaced, 12 pt. Times New Roman or Book Antiqua font.
 - **Topic:** What are your educational goals and career aspirations, and how can this award help you to achieve these goals?

Zeta Phi Beta Sorority, Incorporated

Delta Gamma Zeta Chapter

Shades of Blue Scholarship Application

Applicant Information:		
Last Name:	First Name:	Middle Initial:
Date of Birth:	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	
Permanent Mailing Address:		
Address Line 1:		
Address Line 2:		
City:	State:	Zip Code:
Telephone:	E-mail:	

Student Status (Class standing in January 2013):		
<input type="checkbox"/> H.S. Junior	<input type="checkbox"/> Graduating H.S. Senior	Graduation Date:
School Information:		
School Name:		
Address Line 1:		
Address Line 2:		
City:	State:	Zip Code:
School Telephone:		
Academic Information:		
Cumulative G.P.A.:	List any Academic Honors/Awards/Recognitions:	
College Information:		
Please list colleges/universities you have applied to:		Have you chosen a major/minor?
		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> PENDING
		If yes, specify:
Current School Activities:		
Community Activities:		



Delta Gamma Zeta Chapter of Zeta Phi Beta Sorority, Incorporated

Shades of Blue Scholarship Recommendation Waiver Form

Applicant: Please complete sections A and B below. Submit a copy of this form to the person who will write your letter of recommendation. To ensure that the letter is submitted, provide the recommender with the email address bluescholarship@yahoo.com and/or a stamped envelope addressed to **Zeta Phi Beta Sorority, Inc. Delta Gamma Zeta Chapter, Shades of Blue Scholarship Committee, PO Box 26760, Tempe, AZ 85285-6760**. Each recommendation, along with this form, should be emailed directly from the recommender or placed in the envelope, sealed, and signed across the flap by the recommender. Please note that failure to complete section B (below) waives your right of access to the recommendation.

Section A:

Name of Applicant: _____

Current Educational Institution: _____

Current Grade Level: _____

Section B:

___ I waive the right provided by the Family Educational Rights to Privacy Act of 1974 to view this letter of recommendation when completed and understand that it will remain confidential.

___ I do not waive my right to review this document. Rather, I wish to retain the right to view this letter on file with the Delta Gamma Zeta Chapter of Zeta Phi Beta Sorority, Inc.

Signature: _____ Date: _____

RECOMMENDER:

Your cooperation in providing a letter of recommendation for the above named applicant's academic or professional abilities is appreciated. If the applicant has agreed to the above waiver, scholarship committee will hold your letter as confidential. To preserve the confidentiality of this document, please email your recommendation and this form **directly** to bluescholarship@yahoo.com or seal your letter of recommendation and this form in the envelope the applicant has provided, affix your signature across the flap of the envelope, and place it in the mail.

Name (please print): _____ Phone Number: _____

Institution or Company: _____ Position: _____

Address: _____

Recommender's Signature: _____ Date: _____

Typing your name in the space provided will be considered your official signature. Please enter your initials in the space provided to signify your agreement.