



# ALPHA OMEGA FOUNDATION, INCORPORATED



Marsha E. Morrell Smith, Foundation Chairman

Maureen Fritz, Scholarship Chairman

Tammi M. Swails-Colson, Assistant Scholarship Committee Chairman

## SCHOLARSHIP APPLICATION CHECKLIST

Please be sure to include:

- ✓ **Completed and signed application form by**
  - School Officials
  - Parents/Guardian
  - Applicant
- ✓ **Sealed Official Transcripts [2.0 cumulative grade point average or better]**
- ✓ **Two letters of recommendation**
  - One from a Guidance Counselor or School Official and
  - One from a person in the community (church, neighbor, etc.)
- ✓ **Essay Checklist...**
  - Essay **MUST** be typed
  - One full page
  - Double space
  - Font Type - Times New Roman
  - Font Size - 12
  - Check for correct spelling, grammar, and punctuation
  - **ESSAY QUESTION:**
    - Please attach your typed response to the following question to the application.
    - ***Based on the current economic situation in the United States and as you pursue higher education, how do you plan to budget and build your economic legacy?***

**APPLICATIONS WILL NOT BE ACCEPTED AFTER April 21, 2023**

**Interview: Business attire as follows:**

### **Young Ladies**

*Blouse / skirt*  
*pants*  
*Dress with high neckline*  
*Business suit (skirt or pants)*  
No sweatpants, leggings, shorts, hoodies  
hoodies  
No pajama pants or tops  
No jean pants, jacket, or skirt  
No tennis shoes or Crocs

### **Young Men**

*Dress shirt & tie / dress*  
*Business suit*  
*Sweater / dress pants*  
No sweatpants, shorts,  
  
No pajama pants or tops,  
No jean pants or jackets  
No tennis shoes or Croc

**Send To:**

**Alpha Omega Foundation, Incorporated  
C/O Maureen Fritz, Scholarship Chairman  
P.O. Box 93748 Cleveland, OH 44101**



# ALPHA OMEGA FOUNDATION, INCORPORATED



Marsha E. Morrell Smith, Foundation Chairman  
Maureen Fritz, Scholarship Chairman  
Tammi M. Swails-Colson, Assistant Scholarship Committee Chairman

*(All applications must be mailed to the Scholarship Chairman)*

## SCHOLARSHIP APPLICATION

**Application Deadline: April 21, 2023**

*Please complete the entire application. If question(s) are not applicable, write N/A.*

Return all materials by: **April 21, 2023**

To: Alpha Omega Foundation, Incorporated  
C/O Maureen Fritz, Scholarship Chairman  
P. O. Box 93748  
Cleveland, OH 44101

Name: \_\_\_\_\_

\_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

(Area Code) Phone (Area Code) Phone Month Date Year

Email Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Age: \_\_\_\_\_

High School Attending: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_ Cumulative Grade Point Average: \_\_\_\_\_

Class Rank: \_\_\_\_\_ Number of students in your class \_\_\_\_\_

College entrance exam scores: ACT: \_\_\_\_\_ SAT: \_\_\_\_\_

List three honors/awards received in high school: \_\_\_\_\_

### HONORS/AWARDS

### YEAR RECEIVED

- |    |       |       |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |

List three community activities, organizations (including church) and other outside interests in which you have been involved:

### ACTIVITIES/ORGANIZATION/INTERESTS

### YEAR(S)

### POSITION(S) HELD

- |    |       |       |       |
|----|-------|-------|-------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |

Total hours of volunteer service provided in your senior year \_\_\_\_\_

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**Applicant's Name** \_\_\_\_\_

**College/University/Post Graduate Institute Choice(s) List no more than three.**

	<b>COLLEGE/UNIVERSITY</b>	<b>CITY, STATE</b>
1.	_____	_____
2.	_____	_____
3.	_____	_____

List colleges in which you have been accepted. \_\_\_\_\_  
\_\_\_\_\_

List the area you have chosen as a major. \_\_\_\_\_

Once your application is completed, please have it signed by a School Official (Principal, Assistant Principal, or Guidance Counselor).

_____	_____
School Official Print Name	Signature
_____	_____
Title	Date

*I affirm that the foregoing information is accurate and true to the best of my knowledge.*

_____	_____
Applicant's Signature	Date

_____	_____	_____
Parent/Guardian's Print Name	Signature	Date

Please submit the following with the completed application on or before **April 21, 2023**

1. An official school transcript (with school seal)
2. Two letters of recommendation:
  - One from a principal or assistant principal, guidance counselor, or teacher.
  - One from a person in the community (church, neighbor, etc.)