

# GAMMA PHI BETA FOUNDATION

## SCHOLARSHIP APPLICATION

(undergraduate study)

**Deadline January 31, 2009**



12737 East Euclid Drive  
Centennial, Colorado 80111  
Office: 303-799-1874 ext. 342 Fax: 303-799-1876  
[foundation@gammaphibeta.org](mailto:foundation@gammaphibeta.org)

## GAMMA PHI BETA FOUNDATION 2009 SCHOLARSHIP APPLICATION

Undergraduate members who will be full-time students pursuing undergraduate degrees are eligible for Gamma Phi Beta scholarships. Applications are for the 2009-2010 school year. We will evaluate your application on scholarship, service to campus, community and Gamma Phi Beta, as well as financial need.

### MINIMUM REQUIREMENTS:

1. You must be an initiated member in good standing for at least six months.
2. You must have a minimum cumulative grade point average of 3.0 on a 4.0 scale.
3. You must be a full-time student and an active member of Gamma Phi Beta in the school year in which the scholarship money will be used. Preference will be given to applicants demonstrating significant contributions to the Sorority.
4. You must demonstrate financial need and an effort to obtain other funds.

### GENERAL INFORMATION:

Scholarships are made possible through generous alumnae contributions, and the Gamma Phi Beta Foundation receives more applications than these funds can support. A scholarship recipient may receive a subsequent fellowship for graduate school. Many scholarships and fellowships were designated by the donors to members of specific chapters, specific geographic areas or specific fields of study. You will lose valuable time if you do not simultaneously pursue several other sources of financial aid.

All applicants must complete the Gamma Phi Beta Family Financial Form. Failure to qualify for financial aid from a federal or state student-aid program does not disqualify you for consideration of a Gamma Phi Beta Foundation award.

We encourage you to distribute your recommendation forms at least one month before the deadline. You may want to request four or five recommendations to ensure that you receive two.

If you cannot download the applications from the Gamma Phi Beta Web site, call us before January 24, 2009 and we will send/fax you the application.

### **THE COMMITTEE WILL ONLY CONSIDER COMPLETED APPLICATIONS POSTMARKED BY JANUARY 31, 2009.**

#### **A completed application consists of the following:**

- Application form
- Personal statement
- Statement of experience and activities
- Transcripts from all colleges and universities you have attended (an unofficial "transcript letter" is acceptable if offered by your school)
- Self-addressed, stamped postcard so we can notify you when we've received your complete application.
- Two, sealed letters of recommendation from:
  - > Gamma Phi Beta advisor or President of a House Corporation Board, AND
  - > Faculty member/college administrator or employer who knows you and can comment on your qualifications, OR
  - > Individual (not a family member or collegian) who can substantiate your reasons for requesting a scholarship (i.e. Regional Director, professor, House Corporation Board Treasurer).

**Send your complete application, with all supplemental materials and letters of reference together in ONE envelope to:**

*The Gamma Phi Beta Foundation—Grants Committee  
12737 E. Euclid Drive  
Centennial, CO 80111-6445*

**Please do not staple** any part of your application, transcript or references.

Please read the Application materials closely and make certain that you've followed all the instructions. If you have questions, call Ryan Severts at 303-799-1874 ext. 342 or e-mail [rseverts@gammaphibeta.org](mailto:rseverts@gammaphibeta.org).



**Gamma Phi Beta Foundation SCHOLARSHIP APPLICATION**

*Please type or print in black ink*

Dear Sister,

We are pleased that you have chosen to apply for an undergraduate study scholarship. To ensure that your application gets the attention it deserves, please follow these instructions:

*Type or print clearly in black ink.*

***All materials must be mailed together in one envelope.***

***The envelope must be postmarked by January 31, 2009.***

*Do not staple any part of application, transcript or references.*

*Only complete applications will be considered.*

Awards will be determined by April 30, and you will be informed by mail soon thereafter.

**Personal**

Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
Last First Maiden/Middle MM/DD/YY

Home \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Social Security Number \_\_\_\_\_

College \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-Mail \_\_\_\_\_

Chapter \_\_\_\_\_ Initiation date \_\_\_\_/\_\_\_\_/\_\_\_\_ College/University \_\_\_\_\_

Present year: Freshman \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_ 5th year senior \_\_\_\_\_

Field of study \_\_\_\_\_ Cumulative GPA \_\_\_\_\_

**Personal Statement**

You must submit a Personal Statement with your application. Through it, we learn about you as an individual and your unique experiences, accomplishments, goals and, importantly, your financial need. Please include no more than two typed, double-spaced pages using a 12 point font size regarding:

Personal qualities and experiences that support your academic goals and your accomplishments, and

Your need for financial assistance and your efforts to obtain funding for your education.

**Be sure your name is on each page of your personal statement in the upper right-hand corner.**

**FOR OFFICE USE ONLY:**

- Application form
- Undergraduate transcripts from all colleges attended
- Good standing
- Self addressed, stamped postcard
- Two references
- Personal statement
- Family Financial form

## Education

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### Post High School Education:

Name of Institution	Year(s) Attended	GPA	A=	Field
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## Leadership

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Your contributions to Gamma Phi Beta, your campus activities and your community service are used in assessing this portion of your application. Please include no more than two pages, using a bullet point format and 12 point font, in the format shown below:

- Gamma Phi Beta involvement
  - Positions/offices held, duties and dates
  - Honors or awards received
- Campus Activities
  - Positions/offices held, duties and dates
  - Honors or awards received
- Community Service
  - Contributions and dates

**Be sure your name is on each page of your statement in the upper right-hand corner.**

## References

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Two letters of recommendation (one each) from: Gamma Phi Beta Advisor or President of a House Corporation Board AND a faculty member/college administrator or employer who knows you and can comment on your qualifications **must be sent with your completed application to International Headquarters**. Each reference writer should place his/her letter in a sealed envelope and sign his/her name across the seal. The committee will not accept references from collegians or family members. List below the names, positions and phone numbers of the persons from whom you requested the references. You may request more than two.

Name	Position	Phone
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Do you have any relatives currently serving as Foundation Trustees, Foundation employees, International Council members or committee members? (This may/may not disqualify you for financial aid)

( ) NO ( ) YES

If you answered yes please fill in the name and volunteer position your relationship holds: \_\_\_\_\_

I hereby affirm that all of the information provided in this application and its requested accompanying documents is correct, to the best of my knowledge.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please estimate both your expenses and income from all sources for the 2009-2010 school year in the sections below.**

**Expenses:**

Tuition and fees \$ \_\_\_\_\_  
 Housing and food \$ \_\_\_\_\_  
 Books and other supplies \$ \_\_\_\_\_  
 Sorority dues and fees \$ \_\_\_\_\_  
 Local transportation (vehicle expenses, insurance, bus, etc.) \$ \_\_\_\_\_  
 Transportation to and from school \$ \_\_\_\_\_  
 Clothing and other personal expenses \$ \_\_\_\_\_  
 Loan Payment \$ \_\_\_\_\_  
 Other (please describe) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**Sources of Income:**

Job during upcoming summer \$ \_\_\_\_\_  
 Job during upcoming school year \$ \_\_\_\_\_  
 Parents' contribution (if none or minimal, explain on separate sheet) \_\_\_\_\_  
 Scholarships or Grants \$ \_\_\_\_\_  
 Loans \$ \_\_\_\_\_  
 Personal savings, stocks, trusts, etc. \$ \_\_\_\_\_  
 Other (please describe) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**Total Expenses** \$ \_\_\_\_\_ (A)

**Total Income** \$ \_\_\_\_\_ (B)

**Estimated Need**

Subtract Total Income (B) from Total Expenses (A):

Total Expenses (A) \$ \_\_\_\_\_

-

Total Income (B) \$ \_\_\_\_\_

**Estimated Need** \$ \_\_\_\_\_

**Scholarships and Grants**

Please list the financial aid you have received for this school year and previous school years and their amounts.

Source	Amount	School Year
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Loans**

Please list the loans you have received to date and their amounts.

Source	Amount applied for	Academic School Year
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Other: What other scholarships, fellowships, grants, etc. are you currently seeking?**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**The Information you and your family provide is considered confidential. Only the selection committee will review it.**



**All scholarship applicants must complete this form.**

**Resources**

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**Mother**

Occupation \_\_\_\_\_ Annual income \$ \_\_\_\_\_ Age \_\_\_\_\_

**Father**

Occupation \_\_\_\_\_ Annual income \$ \_\_\_\_\_ Age \_\_\_\_\_

**Other contributing relative**

Occupation \_\_\_\_\_ Annual income \$ \_\_\_\_\_ Age \_\_\_\_\_

**Other income**

\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

**Obligations**

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**Real Estate**

Market value of real estate \$ \_\_\_\_\_  
Date purchased \_\_\_\_\_  
Purchase price \$ \_\_\_\_\_  
Amount owed \$ \_\_\_\_\_  
Monthly mortgage or rent payments \$ \_\_\_\_\_

**Other Family Members currently enrolled in a College or University.**

Who	Age	Year in School	Name of School	Annual Cost
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



**Gamma Phi Beta Foundation**

**Reference Form for Scholarship Applicant**

*Please type or print in black ink*

**Applicant**

Provide your name and chapter and give this form to your references.

Name of applicant \_\_\_\_\_ Chapter \_\_\_\_\_

**Reference Writer**

Please complete this part of the form and return to the applicant in a sealed envelope.

Name of reference  
writer \_\_\_\_\_

Chapter Advisor \_\_\_\_\_ Faculty Member/College  
Administrator/Employer \_\_\_\_\_  
Other  
individual \_\_\_\_\_

Gamma Phi Beta Foundation scholarships are awarded based on scholarship and campus, community and Gamma Phi Beta contributions, as well as financial need. Please address these criteria to the best of your knowledge.

Financial Need	(please rate)	1 2 3 4 5 6 7 8 9 10 low ----- high
Scholarship	(please rate)	1 2 3 4 5 6 7 8 9 10 low ----- high
Contribution to community, campus and Gamma Phi Beta	(please rate)	1 2 3 4 5 6 7 8 9 10 low ----- high

How long have you known the applicant? \_\_\_\_\_

Comments (Use additional pages if necessary. **DO NOT TYPE OR WRITE ON THE BACK OF THIS PAGE.**)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you for returning the form as soon as possible to the applicant in a sealed envelope with your signature across the seal.

Reference Writer's Signature \_\_\_\_\_ Date \_\_\_\_\_

Reference Writer's Position \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Phone \_\_\_\_\_

Reference Writer's Address \_\_\_\_\_