

**ORDER OF AHEPA**  
and  
**DAUGHTERS OF PENELOPE**



**CAPITAL DISTRICT #3**  
**COLLEGE**  
**SCHOLARSHIP**  
**APPLICATION**  
**ACADEMIC YEAR 2010**

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WASHINGTON DC VIRGINIA MARYLAND NORTH CAROLINA WEST VIRGINIA

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Dear Applicant:

PLEASE THOROUGHLY READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING THIS APPLICATION. YOUR APPLICATION BEGINS ON PAGE 3.

**READ CAREFULLY THE ENTIRE APPLICATION.**  
**MAKE SURE ALL** necessary documents **are included** with your application.

- A. Transcripts
- B. S.A.T Scores (High School and College Freshman only) GPA minimum 2.5.
- C. Copies of Certificates (If any)
- D. Written Essay — 300 word essay required.
- E. Any other documents you wish to have reviewed with your application.

**MAKE SURE** your application is **POST MARKED** no later than, **April 1, 2010.**  
**MAKE SURE** you have **ALL** required Signatures. If your **Chapter President or Secretary is not available have the Vice President sign it.**

**MAKE SURE** you mail the application package to the mailing address stated on PAGE FIVE (5).

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**REMEMBER TO BE ELIGIBLE YOU MUST**

- A. Be a child (not niece, nephew, grandchild, cousin, etc.) of either a member of the AHEPA or of a Daughter of Penelope.
- B. Your sponsoring Chapter (Chapter of the President and Vice President) must be in good standing.  
This means the Chapter must have paid all of its District and National per capita dues by **12/31/2009** for all of its members. To confirm eligibility contact your sponsoring Chapter, or the District Marshall.

**DO NOT SEND AN APPLICATION IF YOU ARE A GRADUATE STUDENT, POST GRADUATE OR ARE IN LAW OR MEDICAL SCHOOL.**

**DO NOT SEND AN APPLICATION UNLESS YOU ARE A CHILD OF AN AHEPA MEMBER OR A CHILD OF A DAUGHTER OF PENELOPE MEMBER.**

**DO NOT RETURN THE COVER PAGE OR THIS INSTRUCTION SHEET.**  
**ALL APPLICANTS MUST SUBMIT PAGES 3, 4 AND 5**  
**PAGES 6 AND 7 ARE REQUIRED FOR FINANCIAL NEED**

**IF YOU HAVE ANY QUESTIONS DO NOT HESITATE TO CALL OR EMAIL**

ATTACH A RECENT  
PASSPORT SIZE PHOTO  
OF YOURSELF

Tom T Grias  
District Marshall  
7235 Jessica Lane  
Prince George, VA 23875  
Home Phone (804) 732-7778  
Cell Phone (804) 393-0353:  
[tommy.grias@us.army.mil](mailto:tommy.grias@us.army.mil)

*The entire application package becomes the property of the Scholarship Foundation and will not be returned*

**TO BE COMPLETED BY APPLICANT:**

- A. SCHOLASTIC ACHIEVEMENT \_\_\_\_\_ USE Pages 3, 4, and 5**  
**B. FINANCIAL NEED \_\_\_\_\_ USE Pages 3, 4, 5, 6 and 7**  
**(CHECK ONLY ONE)**

1. Name of Applicant \_\_\_\_\_  
Last First MI

2. HomeAddress \_\_\_\_\_  
(Mailing Address)

3. Tel. No. ( ) \_\_\_\_\_ 4. Date of Birth \_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_

5. Social Security Number \_\_\_\_\_!\_\_\_\_\_|\_\_\_\_\_

6. Name of the College or University you will be attending in the Fall for Undergraduate Studies:

\_\_\_\_\_

City State

\_\_\_\_\_

Name of College Registrar

**7. TO BE ELIGIBLE TO APPLY, YOU MUST:**  
(Please **CHECK** one)

- A. \_\_\_\_\_ Be a son or daughter of a member in good standing of either the ORDER OF AHEPA or The DAUGHTERS OF PENELOPE in District #3.
- B. \_\_\_\_\_ Be a son or daughter of a deceased member of either the ORDER OF AHEPA or The DAUGHTERS OF PENELOPE in District #3.
- C. \_\_\_\_\_ Be a member in good standing of the ORDER OF AHEPA, DAUGHTERS OF PENELOPE, SONS OF PERICLES, or MAIDS OF ATHENA.

**FURTHERMORE, TO BE ELIGIBLE, YOU MUST HAVE A GPA OF AT LEAST 2.5 OR APPLY DUE TO FINANCIAL NEED**

8. **CREDENTIALS REQUIRED:** (Attach to Application)

**HIGH SCHOOL SENIOR:**

High School Transcript, Class Rank, Grade Point Average, and S.A.T Scores.

**COLLEGE UNDERGRADUATES:**

College Transcript and Grade Point Average.

9. LIST ALL HONORS, AWARDS (INCLUDING NATIONAL HONOR SOCIETY, DEANS LIST (Number of Times) AND EXTRA CURRICULAR ACTIVITIES.

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10. LIST EMPLOYMENT HISTORY – PART AND FULL TIME

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11. ALL APPLICANTS MUST ATTACH A THREE HUNDRED (300) WORD ESSAY

**“THE VALUE OF A COLLEGE EDUCATION.”**

**APPLICANT CERTIFICATION:**

Everything I have submitted is true to the best of my knowledge and belief.

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NAME of SPONSORING PARENT  
MEMBER of AHEPA or DAUGHTERS of PENELOPE

\_\_\_\_\_  
AHEPA or DOP ID # of Parent and  
CHAPTER OF SPONSORING PARENT

**TO BE COMPLETED BY THE SPONSORING AHEPA  
OR DAUGHTERS CHAPTER**

Our Chapter hereby sponsors the application of:

Name of Applicant \_\_\_\_\_

This application appears to meet all of the eligibility criteria established, and we hereby request that it be reviewed and considered for the District Scholarship. This applicant or his/her parent is a member in **good standing** at the time of the application.

CHAPTER PRESIDENT	CHAPTER VICE PRESIDENT/SECRETARY
_____	_____
Print Name	Print Name
_____	_____
Signature	Signature
_____	_____
Name of Chapter & Number	Name of Chapter & Number
_____	_____
Date	Date



**IMPORTANT**

CHAPTERS WHO HAVE PAID IN FULL, BOTH THEIR NATIONAL AND DISTRICT PER CAPITA TAX ARE ELIGIBLE TO SUBMIT APPLICANTS, (GOOD STANDING MEANS A CHAPTER IS PAID THROUGH **DECEMBER 31, 2009**.)

**NO SCHOLARSHIP APPLICANT WILL BE CONSIDERED UNLESS THE COMPLETED APPLICATION, REQUIRED CREDENTIALS AND THE 300 WORD ESSAY IS POST MARKED NO LATER THAN APRIL 1, 2010**

PLEASE MAIL THE COMPLETED APPLICATION & SUPPORTING DATA TO:

Tom T Grias  
District No. 3 Marshall  
7235 Jessica Lane  
Prince George, VA 23875  
Email: [tommy.grias@us.army.mil](mailto:tommy.grias@us.army.mil)

**INFORMATION REQUIRED FOR FINANCIAL NEED  
SCHOLARSHIP APPLICATIONS**

**Please complete the following questionnaire; make sure to answer all  
questions (If the question does not apply, use N/A as your response)  
PLEASE PRINT**

Name \_\_\_\_\_ S.S. # \_\_\_\_\_ ! \_\_\_\_\_ ! \_\_\_\_\_ Date: \_\_\_\_\_ 200 \_\_\_\_\_

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

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

Do you live with your parents? Yes ( ) No ( )

Are you a U.S. Citizen? Yes ( ) No ( ) If not a permanent resident, indicate alien

Registration Number \_\_\_\_\_

If No, explain status/ type of visa \_\_\_\_\_

**IF YOU ANSWERED "NO" TO ALL OF THE ABOVE CONTACT  
THE DISTRICT MARSHAL**

College Major: \_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_

List all colleges/universities you have attended, whether you received financial aid or not. Also, list credit hours earned.

INSTITUTION: COMPLETED	CITY & STATE	DATES ATTENDED	CREDITS
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you applied for financial aid through the FAFSA Y { } N { }. If YES, what type of aid are you receiving, or expecting to receive? Pell Grant \_\_\_\_\_ SEOG \_\_\_\_\_ Work Study \_\_\_\_\_  
Stafford Loan \_\_\_\_\_ Other \_\_\_\_\_

Have you applied for financial aid at your college/university? If YES, what aid are your receiving or expecting to receive?

Please explain:

\_\_\_\_\_

Do you anticipate receiving any outside scholarships? Yes ( ) No ( )

**FINANCIAL NEED FORM (continued)**

If YES, source: \_\_\_\_\_ Amt. \_\_\_\_\_

Your parents' **current** marital status: \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed

Number in your parents' household in 2009 (Include yourself and parents. **Do not include your parents, other children or any other person, unless they are claimed for tax purposes.**)

Students expected income for 2010 Income earned from work by you \_\_\_\_\_

Other taxable income \_\_\_\_\_ Non taxable income and benefits \_\_\_\_\_

Parents expected income in 2010 \_\_\_\_\_

Income earned from work by your father \_\_\_\_\_

Income earned from work by your mother \_\_\_\_\_ other taxable income \_\_\_\_\_

Non-taxable income \_\_\_\_\_

Student's cash, checking, and saving accounts:

\_\_\_\_\_

Parents' cash, checking, and savings accounts:

\_\_\_\_\_

Other real estate and investments: Value \_\_\_\_\_ Debt: \_\_\_\_\_

Business Value:

\_\_\_\_\_

Debt \_\_\_\_\_ Earn Value: \_\_\_\_\_ Debt: \_\_\_\_\_

Please list any circumstances, which will affect your financial situation during the academic year 2009.

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

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

APPLICANTS PLEASE PAY CLOSE ATTENTION TO THE FOLLOWING:

It is very important that you score as high as possible on your essay. As you can see below the essay carries 30 possible points.

The essay must be 300 words in length.

The essay must have a HEADING or TITLE

Your essay should address the topic "The Value of a College Education."

Check your grammar and spelling.

It must be typed – one and one-half spacing preferred.

Use standard type without italics, bolding or graphics. Times Roman or Arial type preferred. 10 or 12 point. Use white paper.

Do NOT include the name of your high school or college

The format for grading COLLEGE UNDERGRADUATES' APPLICATIONS:

Grade Point Average	possible 40 points
Dean's List	possible 10 points
Honors/Extra Curricular Activity	possible 10 points
Part Time Employment	possible 10 points
Essay	possible <u>30</u> points
Total	possible 100 points

The format for grading HIGH SCHOOL SENIORS OR FIRST YEAR COLLEGE IS:

SAT score	possible 10 points
Grade Point Average	possible 30 points
National Honor Society	possible 10 points
Honor/Extra Curricular Activities	possible 20 points
Essay	possible <u>30</u> points
Total	possible 100 points