



**Pi Omicron Zeta Chapter  
Zeta Phi Beta Sorority, Inc.  
Dr. Barbara Falls Book Scholarship 2020**

Greetings School Counselors, Administrators and Teachers,

The Dr. Barbara Falls Book Scholarship Committee of Pi Omicron Zeta Chapter, Zeta Phi Beta Sorority Inc. is offering an annual book scholarship to a young woman graduating from high school Class of 2020. The Scholarship amount will be \$1,000.00. Please review the requirements below and provide the attached application to your students that meet the following criteria.

Criteria for this Scholarship:

- Applicant must be a graduating high school senior
- Applicant must have a GPA of 2.5 or greater
- Applicant must plan to attend an institution of higher learning

To apply, you must follow these steps:

- Print and complete the attached application, incomplete applications will not be considered
- Submit all required information and documentation
- Mail packet to the committee to be received by February 3, 2020

Scan and then email one copy of a completed application package to:  
**ZPHIB.POZ@gmail.com**

Thank you for assisting us in helping a desired student further their education.

Sincerely,

Dr. Barbara Falls Book Scholarship Committee  
Pi Omicron Zeta Chapter  
Zeta Phi Beta Sorority, Inc.  
SCHOLARSHIP APPLICATION 2020  
[www.zpb1920poz.org](http://www.zpb1920poz.org) [zhib.poz@gmail.com](mailto:zhib.poz@gmail.com)



## SCHOLARSHIP APPLICATION 2020

Please print or type		
1.	Last Name:	First Name:
2.	Current address:	
	City:	State:                      Zip:
3.	Telephone Number: (     )	Email Address:
4.	Name and location of high school:	
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA. Your most recent school transcript is required.	
6.	Are you the first person in your family to go to college:    YES ___    NO ___	
7.	Name of the college you plan to attend:	
8.	<b>(Answer the following questions on a separate sheet)</b> A. List any academic honors, awards and membership activities while in high school:  B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities:  C. List your non-school sponsored volunteer activities in the community:	
9.	<u>Teacher/Counselor References (List two (2)):</u>  1. Name, address and phone   2. Name, address and phone	
10.	<b>On a separate sheet please write a minimum 200 word essay addressing:</b> <i>“Describe a time in your life when you have faced adversity and explain how you were able to overcome it”.</i>	



## STATEMENT OF ACCURACY FOR STUDENTS AND PARENT/GUARDIAN

I hereby authorize the verification of the information provided on this form.

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the Dr. Barbara Falls book scholarship. (Winner may waive photo due to unusual or compelling circumstances.)

**I hereby understand that if chosen as a scholarship winner, according to Dr. Barbara Falls book Scholarship policy, I must be present at the Pi Omicron Zeta Luncheon on April 2020 to receive the award.**

I hereby understand that incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

**Signature of scholarship applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Checklist:

- \_\_\_\_\_ Application
- \_\_\_\_\_ 200 work essay
- \_\_\_\_\_ Two letters of recommendation (one from school guidance counselor and one from a teacher)
- \_\_\_\_\_ High School Transcript

**EMAIL COMPLETE APPLICATION PACKAGE To:**  
**ZPHIB.POZ@gmail.com**

**Pi Omicron Zeta Chapter  
Zeta Phi Beta Sorority, Inc.**

### Reminder:

**The deadline for this application to be received is February 2020. NO EXCEPTIONS!**