



Kappa Alpha Psi Community Project

*Non Profit of the Berkeley Alumni Chapter
Training for Leadership Since 1911*



Kappa Alpha Psi Scholarship Guidelines

Kappa Alpha Psi Fraternity Inc. is a predominantly Black Fraternity founded in 1911 on the campus of Indiana University. For several decades Kappa Alpha Psi has sponsored a scholarship program for high school seniors in an effort to increase the number of African-Americans attending college throughout the United States.

ELIGIBILITY

To be eligible for the Kappa Alpha Psi Scholarship essay contest:

- Scholarship is for high school seniors from historically underrepresented groups who will be attending any accredited 4 year college or university in the Fall of 2017.
- Applicant must be a U.S. citizen.
- You must have a 3.0 or higher GPA
- Active in Community Service Initiatives
- Live in Alameda County, Contra Costa County, San Mateo County, Marin County, or San Francisco County

AWARDS

If selected as recipient, the applicant will receive a monetary award

APPLICATION

Interested students must submit an essay of 500 words or less about “Why is a College Education Important to Me” with their contact and school information (mailing address, phone number, e-mail address, name of high school and their counselors name as well as their counselors phone number), one letter of recommendation by a school counselor, principal or teacher and turn in no later than March 25, 2017.

Applicants are responsible for gathering and submitting information. All information is considered confidential.

HOW IS AN ESSAY SCORED?

A scoring rubric is used to judge each essay. Four is the highest score an essay can receive from one reader. Since each essay is read by four readers, the maximum score an essay can receive is 16.

Score Description

- | Score | Description |
|-------|---|
| 4 | Clearly addresses the writing task, demonstrates a clear understanding of purpose, maintains a consistent point of focus, organizational structure and contains few, if any errors in the conventions of the English language (grammar, punctuation, capitalization, and spelling). |
| 3 | Demonstrates a general understanding of purpose, addresses all parts of the writing task, few errors in conventions of English language. |
| 2 | Addresses only part of the writing task, demonstrates little understanding of purpose, and contains several errors in the conventions of the English language. |
| 1 | Addresses only one part of the writing task, demonstrates no understanding of purpose, contains serious errors in the conventions of the English language. |



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PAYMENT OF SCHOLARSHIP

Winners are required to submit proof of full-time study* at a 4 year college. Once this information is received, Kappa Alpha Psi will provide a payment in one or more installments to student.

OBLIGATIONS

Recipients must notify Kappa Alpha Psi of any changes of address, school enrollment, or other relevant information.

REVISIONS

Kappa Alpha Psi reserves the right to review the conditions and procedures of this scholarship and to make changes at any time including termination of the program.

****Full-time study is defined as full-time enrollment for entire academic year.***

Applications can be downloaded from our website at WWW.KAPPAPROJECT.ORG and submitted electronically to jparrishiii@msn.com. All official transcripts must be mailed to address below.

or

The application and required documents must be postmarked no later than March 25, 2017. Return the completed application and documentation to:

Kappa Alpha Psi Fraternity
Community Project Scholarship Program
Attn: James Parrish III
635 Durant Avenue
San Leandro CA 94577

For additional information, please call James Parrish III at (510) 813-0154 or e-mail

jparrishiii@msn.com. Applications can be downloaded from our website at WWW.KAPPAPROJECT.ORG



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2016 - 2017 Scholarship Application

*****Information must be digitally inserted in the required fields*****

APPLICANT INFORMATION

Last Name	First Name	Middle Init.	E-mail:
Home Address:			City, State, Zip:
Primary Phone Number: ()			Secondary Phone Number: ()
Year of Birth:			Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>
Current or Intended Major:			
Ethnicity:			

HOUSEHOLD INFORMATION

Name of Parent/Guardian (if applicant is a minor):	Address: (if different from applicant's home address)
Relationship to Applicant:	Phone Number: ()

CURRENT SCHOOL INFORMATION (if applicable)

Name of School:	
School Address:	
City, State, Zip:	
Telephone: ()	
Current Weighted GPA:	Current Grade Level:

EXTRACURRICULAR: VOLUNTEER EXPERIENCES, LEADERSHIP ACTIVITIES, COMMUNITY INVOLVEMENT

Organization	Position	Description	Year	Hours/month



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EMPLOYMENT EXPERIENCE (if applicable)

Current Work Experience		Previous Work Experience	
Name of Company:		Name of Company:	
Position:		Position:	
Major responsibilities:		Major responsibilities:	
Hire Date:	Date Left:	Hire Date:	Date Left:
Hours/Week:		Hours/Week:	

REFERENCES PROVIDING LETTERS OF RECOMMENDATION

Name:	Relationship to applicant:	Address and/or e-mail:	Telephone: ()
Name:	Relationship to applicant:	Address and/or e-mail:	Telephone: ()

CHECK LIST

You must include the following documents as part of the application:

- Completed Scholarship Application
- Official High School Transcript
- Copy of SAT/ACT score
- Provide one copy of a typed **Personal Statement** providing information about your background, community involvement, career goals, desire to contribute to your community and knowledge of Kappa Alpha Psi Fraternity, Inc. You should consider this statement as the equivalent of a screening interview. Information about unique personal or financial circumstances may also be added. The Personal Statement must not exceed two pages.
- One copy of "Why a College Education is important to me"
- One signed letter of recommendation written by principal, teacher or counselor.
- One signed letter of recommendation from a community representative.

CERTIFICATION STATEMENT

All of the information on this application is true and complete to the best of my knowledge. If asked to do so, I agree to provide proof of the information that I have given on this application. I realize that if I do not give proof when asked, I will not be considered for a scholarship.

Signature of Applicant

Date

Signature of Parent/Guardian (if applicant is a minor)

Date