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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Scholarship Application Check List | | | | | | | | | | |
| Revised 01-2023 | | | | | | | | | | |
|  | | | | | | | | | | |
| 1. | Applicant: | | | | | | | | | |
|  | | |  |  | | |  |  | | |
| Last name | | |  | First name | | |  | Middle initial | | |
|  | | | | | | |  | |  | |
| Name of school attending | | | | | | |  | | Chapter Number | |
|  | | | | | | | | | | |
| 2. | Sent a certified, sealed copy of your transcripts | | | | | | | | |  |
| 3. | References | | | | | | | | |  |
| 4. | Awards, recognitions, and activities report | | | | | | | | |  |
| 5. | Community service report | | | | | | | | |  |
| 6. | Indicate the school or college you plan to attend | | | | | | | | |  |
| 7. | Degree of certification listed | | | | | | | | |  |
| 8. | The application package or the copies **ARE NOT** in a binder, notebook, or acetate cover | | | | | | | | |  |
| 9. | All verification signatures complete | | | | | | | | |  |
| Date received by state | |  | | | Postmarked |  | Active member | | |  |
| Application must be received by or postmarked by January 31. | | | | | | | | | | |