Alpha Kappa Alpha Sorority, Incorporated®

Upsilon Mu Omega Chapter

The Diamond Jubilee Pearls Foundation, Incorporated

**UNDERGRADUATE SCHOLARSHIP**

The Diamond Jubilee Pearls Foundation, Incorporated of Alpha Kappa Alpha Sorority, Incorporated – Upsilon Mu Omega Chapter was established in 1999. Its primary goal is to support educational achievements through scholarships, grants and stipends. Since its inception, the Foundation has awarded over $100,000.00 to students of all ages. The Foundation is now accepting applications for its 2021-2022 scholarship program. The scholarships described below provide financial assistance to undergraduate students who are currently enrolled in an accredited college, university, or trade school. A student may apply for any of the three scholarships listed below they qualify for, but will only receive one scholarship, if awarded. Each scholarship will be a minimum of $1,000.00.

The completed application package can be submitted via e-mail to:

djpfscholarship@gmail.com

(subject should be “Undergraduate Scholarship Application,” LASTNAME)

The completed application package can be submitted via mail to:

Upsilon Mu Omega Chapter

Alpha Kappa Alpha Sorority, Incorporated

P.O. Box 250645

Milwaukee, WI 53225.

**Deadline**

E-mailed forms must be received by **May 7th, 2021**. Mailed forms must be **postmarked by May 7th, 2021**. Late or incomplete packages will *not* be reviewed.

Alpha Kappa Alpha Sorority, Incorporated®

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**ACADEMIC SHOLARSHIP**

Eligibility Criteria:

* Undergraduate student (currently enrolled in an accredited college, university, technical, or trade school)
* African American/Black
* City of Milwaukee resident
* 3.0 grade point average on a 4.0 scale

A complete application package for the Academic Scholarship includes:

* Completed scholarship application
* Current **official transcript** (with the institution’s seal)
* A one (1) page typed essay, describing your career goals and aspirations and the importance of academic achievement. *Formatting Requirements:* 12-point font size, 1” margins, single spaced.
* Three (3) letters of recommendation (excluding relatives). One letter must be from a professor or an academic advisor. Please use the enclosed recommendation form. A separate letter must be submitted along with recommendation form. **All forms and letters must be signed.**

**ANNIE J CARLISLE (STEAM) SCHOLARSHIP**

Eligibility Criteria:

* Undergraduate student (currently enrolled in an accredited college, university, technical, or trade school)
* African American/Black
* City of Milwaukee resident
* 3.0 grade point average on a 4.0 scale
* Majoring in STEAM (i.e., Science, Technology, Engineering, Arts, and Mathematics (Accounting, Finance, Marketing, or Economics etc.)

A complete application package for the Annie J. Carlisle (STEAM) Scholarship includes:

* A completed scholarship application
* A current **official transcript** (with university’s seal)
* A one (1) page typed essay, describing your career goals and aspirations in a STEAM related field. *Formatting Requirements:* 12-point font size, 1” margins, single spaced.
* Three (3) letters of recommendation (excluding relatives). One letter must be from a professor or an academic advisor. Please us the enclosed recommendation form. A separate letter must be submitted along with the form. **All forms and letters must be signed.**

**FIRST GENERATION COLLEGE STUDENT SCHOLARSHIP**

Eligibility Criteria:

* Undergraduate student (currently enrolled in an accredited college, university, technical, or trade school)
* African American/Black
* City of Milwaukee resident
* 2.5 grade point average on a 4.0 scale

A complete application package for the Academic Scholarship includes:

* Completed scholarship application
* Current **official transcript** (with the institution’s seal)
* A one (1) page typed essay, describing your career goals and aspirations for successfully completing college as the first person in your family. *Formatting Requirements:* 12-point font size, 1” margins, single spaced.
* Three (3) letters of recommendation (excluding relatives). One letter must be from a professor or an academic advisor. Please use the enclosed recommendation form. A separate letter must be submitted along with recommendation form. **All forms and letters must be signed.**

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**UNDERGRADUATE SCHOLARSHIP APPLICATION**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_Zip:\_\_\_\_

Home Telephone:(\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone:\_(\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Scholarship for which you are applying **(Please check one only)**:

Academic: \_\_\_\_\_\_\_\_\_\_\_ Annie J Carlisle: \_\_\_\_\_\_\_\_\_\_\_\_ First Generation College Student\_\_\_\_\_\_\_

Name of College/University: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic Scholarship and Annie J Carlisle GPA 3.0 or higher on a 4.0 scale\_\_\_\_\_\_\_\_\_\_\_

First Generation College Student GPA 2.5 or higher on a 4.0 scale\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_

Major/Minor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Extracurricular Activities: Awards and Special Recognitions:

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

Community involvement: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- |
| **References** (Provide three references): | | |  |
| **Name** | **Telephone** | **Email** | |
| 1. |  |  | |
| 2. |  |  | |
| 3. |  |  | |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Signature) (Date)** Alpha Kappa Alpha Sorority, Incorporated®

Upsilon Mu Omega Chapter

The Diamond Jubilee Pearls Foundation, Incorporated

**UNDERGRADUATE SCHOLARSHIP RECOMMENDATION FORM**

The Diamond Jubilee Pearls Foundation, Incorporated of Alpha Kappa Alpha Sorority, Incorporated – Upsilon Mu Omega Chapter was established in 1999. Its primary goal is to support educational achievement through scholarships, grants and stipends. Since its inception, the Foundation has awarded over $100,000.00 to students of all ages. The Foundation is now accepting applications for its 2021-2022 scholarship program.

Please complete the following recommendation form on behalf of the student who requested it. A separate letter of recommendation may be submitted *with* the completed form.

The Completed Recommendation Form can be submitted via e-mail to:

djpfscholarship@gmail.com

(subject should be “Undergraduate Scholarship Recommendation Form,” LASTNAME)

The Completed Recommendation Form can be submitted via mail to:

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**Deadline**

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Alpha Kappa Alpha Sorority, Incorporated®

Upsilon Mu Omega Chapter

The Diamond Jubilee Pearls Foundation, Incorporated

**Recommendation Form**

**Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Your assessment of the applicant will help us in our evaluation of his/her application. Please rate the applicant on the following characteristics by marking the appropriate rating for each characteristic:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| AREA | Below Average | Average | Good (above average) | Very Good (well above average) | Excellent (top 10%) | Outstanding (top 5%) | Top Few  (top 1%) |
| Diligence |  |  |  |  |  |  |  |
| Academic Achievement |  |  |  |  |  |  |  |
| Interpersonal Relations |  |  |  |  |  |  |  |
| Maturity |  |  |  |  |  |  |  |
| Motivation |  |  |  |  |  |  |  |
| Leadership |  |  |  |  |  |  |  |
| Concern for Others |  |  |  |  |  |  |  |
| Initiative |  |  |  |  |  |  |  |
| Overall  Assessment |  |  |  |  |  |  |  |

How long have you known this applicant? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_years and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_months.

In what capacity have you known this applicant? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- |
| Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Organization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Position/Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Signature) (Date)**

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**Recommendation Form**

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| Academic Achievement |  |  |  |  |  |  |  |
| Interpersonal Relations |  |  |  |  |  |  |  |
| Maturity |  |  |  |  |  |  |  |
| Motivation |  |  |  |  |  |  |  |
| Leadership |  |  |  |  |  |  |  |
| Concern for Others |  |  |  |  |  |  |  |
| Initiative |  |  |  |  |  |  |  |
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How long have you known this applicant? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_years and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_months.

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| Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Organization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Position/Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Signature) (Date)**

Alpha Kappa Alpha Sorority, Incorporated®

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**Recommendation Form**

**Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| Academic Achievement |  |  |  |  |  |  |  |
| Interpersonal Relations |  |  |  |  |  |  |  |
| Maturity |  |  |  |  |  |  |  |
| Motivation |  |  |  |  |  |  |  |
| Leadership |  |  |  |  |  |  |  |
| Concern for Others |  |  |  |  |  |  |  |
| Initiative |  |  |  |  |  |  |  |
| Overall  Assessment |  |  |  |  |  |  |  |

How long have you known this applicant? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_years and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_months.

In what capacity have you known this applicant? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Organization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Position/Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Signature) (Date)**