

# Madison Beta Omega Chapter of Tri Kappa

## Criteria:

Minimum 3.0 GPA required to apply for the 4-year bachelor's degree scholarship.

Minimum 2.5 GPA required to apply for the 2-year associate's, technical, or vocational degree or certificate scholarship.

Essay \*see application for more information.

Include a transcript.

Place your name on all materials.

## Amount:

\$1,000 for 4-year

\$500 for 2-year

## Deadline:

If you would like for the guidance office to mail on your behalf, submit completed application to the guidance office no later than NOON on Friday, March 15, 2024.

Or

Submit your application to the Tri Kappa Scholarship Chairperson to be postmarked by March 31, 2024.

## Mail to:

Rachel Sharpe

718 W. Main St.

Madison, IN 47250

\*Place your name on all materials submitted.

If you receive a scholarship you are asked to attend a reception in your honor on Monday, May 13, 2024.

\*\*See application for full details

# Madison Beta Omega Chapter of Tri Kappa Scholarships for Students Pursuing a

4-Year Bachelor's Degree

or

2-Year Associate's/ Technical/ Vocational Degree

*Children/wards of active or inactive Tri Kappa members are NOT eligible to apply.*

1. The number of scholarship awards and the dollar amounts of each individual scholarship award vary from year to year. For 2024, several \$1000 scholarships will be awarded for those attending a 4-year college and/or \$500 for a 2-year college.
2. Minimum 3.0 GPA is required to apply for the 4-year bachelor's degree scholarship and 2.5 GPA for students applying for the 2-year associate's, technical, or vocational degree or certificate scholarship.
3. Complete all sections of the application form. Type or print your responses in the spaces provided.
4. You may use attachments if needed.
5. Both scholarships require an essay. Your essay requirements:
  - a. Between 250 words to 500 words
  - b. Single spaced on one page
  - c. Tri Kappa promotes charity, culture, and education. Discuss how you incorporate these into your life.
6. Provide your complete and current transcript.
7. **DEADLINE:** Submit your application to our Tri Kappa Scholarship Chairperson to be postmarked by **March 31, 2024:**
  - Place your name on all materials submitted.
  - Mail to: Rachel Sharpe, 718 W. Main Street , Madison, IN 47250
8. Students selected to receive a Tri Kappa Beta Omega Chapter Scholarship will be invited to, and asked to attend, a reception in their *honor* on **Monday, May 13, 2024.**
9. All information is confidential. The Tri Kappa Scholarship Committee members are the only people that will review your application. Each of them understands the level of trust this entails and they are committed to honor your privacy. After the final selection process, all applications are destroyed.

## Madison Beta Omega Chapter of Tri Kappa Scholarship Application

Type or print all information in black ink. You may use attachments in addition to the form.  
Applicants should have their full name on each answer page and all materials submitted.

Student Name \_\_\_\_\_ High School \_\_\_\_\_

E-mail \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Home Address \_\_\_\_\_

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

### **Student Information**

1) Your Cumulative GPA \_\_\_\_\_

2) List all honors, advanced placement and college courses you have taken. You may include this on your attached activity resume (see question #3).

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

3) Please attach a high school activity resume to include:

- extracurricular activities (clubs, athletics, band, choir, etc.)
- leadership roles or honors obtained
- work experience you had during high school
- volunteer work (either in school or in the community)

4) Where do you plan to pursue your post-secondary education? \_\_\_ 2-year degree \_\_\_ 4-year degree

\_\_\_\_\_

5) Have you been accepted? \_\_\_\_\_

6) What is your intended major or course of study?

\_\_\_\_\_

### **Parent/Family Information**

Mother's Name \_\_\_\_\_

Is your mother or legal guardian a current or former Tri Kappa member? \_\_\_\_\_

Father's Name \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

**POSTMARK DEADLINE: March 31, 2024**