**Alpha Delta Kappa Dee Copeland Scholarship Application**

**Florida Delta Chi Chapter**

The Florida Delta Chi Chapter of Alpha Delta Kappa, an honorary sorority for women educators, will award a $500.00 scholarship to one deserving high school senior from a Santa Rosa County High School.

This scholarship is based on scholastic achievement, personal character, leadership qualities, aptitude, future plans, and need. Preference will be given to students wishing to enter the field of education. One of the main goals of Alpha Delta Kappa is altruism. This scholarship is one way the Delta Chi Chapter of ADK recognizes our local students.

Scholarship money may be used for any college expenditure, including tuition, fees, or books. The winner will be contacted and will need to attend our monthly meeting at a local restaurant on April 19th, around 5:00pm, for dinner and to receive the scholarship. A certificate will be presented at the senior awards ceremony for your high school. The scholarship check must be deposited or cashed by the recipient before the end of May so that we are able to close out our end-of-year budget.

Attached are the application forms which must be completed by the senior students and submitted to the senior guidance counselor at their school.

**Applications must be TURNED INTO YOUR COUNSELOR by Thursday, MARCH 24, 2022**

Applicant must:

1. Be a United States citizen.
2. Be a responsible high school senior at the time of the application.
3. Be recommended by his/her respective school guidance counselor.
4. Pursue acceptance at an accredited college, university or vocational school.

SELECTION PROCEDURE

Recipient(s) will be chosen on the basis of:

1. Pursuit of a course of study in the field of education

2. Excellence in high school grades (grade point average) and test scores (ACT and/or SAT)

3. Other indications of character and leadership

4. Essay

5. Financial need

TO APPLY

Student(s) should:

1. Complete the application form (three pages) and write an essay (300-500 words).
2. Have their guidance counselor verify and sign Counselor’s Student Data Information Form.
3. Turn in all completed forms to their School Counselor by March 25, 2022.

**Alpha Delta Kappa Dee Copeland Scholarship, FL Delta Chi Chapter, Applicant Form**

**Personal Information**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last First Middle

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

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

Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parents or Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or guardian phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High Schools Attended (Include: school name, city, state and dates of attendance.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date, time, and location of senior awards ceremony \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If selected as the winner of this scholarship, I hereby acknowledge that I shall use the money to help finance my education.

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

Student’s Signature Date

**Please fill in the continued pages of the application form and complete the essay.**

**Write an essay of 300-500 words addressing at least 1 of the following topics.**

* **How has your education contributed to who you are today?**
* **Describe your most meaningful achievements and how they relate to the importance of your education.**
* **What do you hope to accomplish in your role as an educator?**

(For the purpose of an impartial judging of your essay please do not include the name of your high school or any teacher or employee of your school nor the names of any relatives in your essay. You may simply put X High School and Mr. or Mrs. X when referring to these places and people. You may, however, mention their relation to you (English teacher, mom, dad, uncle, etc.). Thank you!

Please have your Guidance Counselor sign and date this page after he/she has filled out page 4 of the application.

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

Signature of Guidance Counselor Date

**Alpha Delta Kappa Dee Copeland Scholarship, FL Delta Chi Chapter, Applicant Form**

**Scholarship and College Information:**

1. Are you the recipient of any other scholarships? If known, please specify sponsor and amount. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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2. List colleges or vocational/technical schools to which you have applied for admission. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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3. If you have decided which school you will attend, please state name of school.

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4. What course of study do you plan to pursue? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Awards, Memberships, Honors, Activities: Attach a “Brag Sheet” or** **use this sheet.**

1. List membership in honor societies, dates of membership, offices held.

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

2. List special honors and awards received during high school years.

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3.List participation in school activities and elected positions. Indicate years. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. List participation in community activities or community service. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. List any employment you have or have had. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Alpha Delta Kappa Dee Copeland Scholarship, FL Delta Chi Chapter**

**Guidance Counselor’s Student Data Information Form**

We request that this form be completed by your guidance counselor or a duly authorized representative of the school and attached to the completed application.

Please answer all questions applicable for scholarship committee consideration.

Number of students in graduating class\_\_\_\_\_\_\_\_\_\_

Approximate class rank\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of graduation\_\_\_\_\_\_\_\_\_\_\_

Grade point average \_\_\_\_\_\_\_\_ (weighted) \_\_\_\_\_\_\_\_\_\_ (unweighted)

SAT score \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACT score \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ASVAB \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any other test scores? Please list name of test and score.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attendance record Good\_\_\_\_\_ Average \_\_\_\_ Poor \_\_\_\_\_

Tardy record Good\_\_\_\_\_ Average \_\_\_\_ Poor \_\_\_\_\_

Recommendation of counselor Yes \_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_

Please provide any other information about the applicant (without mentioning his/her name) that you feel may help with the committee’s decision. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Guidance Counselor: Please sign and date this application at the bottom of page 2 and forward all applications through the courier to Cheri Kaniper, ADK Scholarship Chair, Milton High School. All applications must be received by Monday, March 28, 2022.