



ZETA PHI BETA SORORITY INCORPORATED

ETA LAMBDA ZETA CHAPTER BOOK SCHOLARSHIP APPLICATION 2024

STATEMENT OF ACCURACY FOR APPLICANTS

I hereby affirm that all the information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship recipient my picture may be taken and used to promote the Eta Lambda Zeta Book Chapter Scholarship Program.

I hereby understand that if chosen as a scholarship recipient, according to Eta Lambda Zeta chapter Scholarship policy, it is my responsibility to remit to Eta Lambda Zeta Chapter Scholarship Committee the appropriate information for my scholarship to be paid directly to me for my fall semester 2024. This award is for Educational Purpose Only.

I hereby understand that I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Applicant Signature

Date

To be completed by Guidance Counselor:

STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR

I hereby affirm that this application meets the criteria set forth by this scholarship program and that I support this application to Eta Lambda Zeta Scholarship Committee.

Name of Guidance Counselor submitting the application: _____

High School: _____

Counselor Contact information (email and phone): _____

Guidance Counselor Signature

Date

Please make sure to upload all required documentation:

elzscholarship24@gmail.com

Deadline submission: **April 15, 2024 by 10:00pm**

For Eta Lambda Zeta Scholarship committee use only:

Checklist

- Application and Statement of Accuracy
- Minimum of 3 letters of recommendation
- School Transcript reflecting 6 current semesters' study

- Essay
- Guidance Counselor signature
- Head Shot Photo