

# The Cosette Reid Dennis Book Scholarship APPLICATION 2020

Zeta Phi Beta Sorority, Incorporated Omega Mu Zeta Chapter

> Mail to: Mrs. Maxine Robinson 2 Gary Court Somerset, NJ 08873

Scholarship, Service, Sisterhood and Finer Womanhood

#### December 19, 2019

Dear Applicant:

On behalf of Zeta Phi Beta Sorority, Inc., Omega Mu Zeta Chapter, we would like to congratulate you on this very important milestone in your life. The principles of Zeta Phi Beta Sorority, Inc are Scholarship, Service, Sisterhood, and Finer Womanhood. We value education and scholarship dearly. The process of not only choosing a college, but also deciding how you would like to continue your education can most certainly be an overwhelming task. With this in mind, the Ladies of Omega Mu Zeta Chapter, are presenting you with an opportunity to apply for **The Cosette Reid Dennis Scholarship for \$500** to be used towards books and supplies. This scholarship will be for a graduating high school female of African descent majoring in nursing or social work.

Tjwana Merial Dennis, in memory of her mother, Cosette Reid Dennis, would like to offer a graduating high school female of African descent attending a four (4) year college/university, who meet academic and leadership criteria, to receive a non-renewable academic scholarship. A few of the qualifying details are as follows: attend a high school and/or reside in our service area of Middlesex County, have a parent who is a member of Zeta Phi Beta Sorority, Omega Mu Zeta Chapter, and/or be a member of Omega Mu Zeta Youth Auxiliary. All applicants must have a minimum grade point average (GPA) of 3.3 and demonstrate leadership through extra-curricular activities and community service and/or work in a health care setting. You must be available to attend an interview during the week of *March 22 through March 28, 2020.* Also, all scholarship winners MUST attend the Zeta Youth Rocks Awards Ceremony on Saturday, *May 30, 2020.* 

The completed application along with the required documents must be **POSTMARKED NO LATER THAN Sunday February 9, 2020.** Applications that are submitted late and/or incomplete will not be considered – NO **EXCEPTIONS.** Please make sure that you have read and understand all of the guidelines of the scholarship application. Enclosed you will find the guidelines and application for our 2020 Scholarship. If you are chosen to receive this scholarship, your Guidance Counselor will be notified. An official letter from Zeta Phi Beta Sorority, Inc. Omega Mu Zeta Chapter will be sent to your current address. Only scholarship recipients will be notified. Again, congratulations on your decision to pursue higher education, and we pray you have much success in your future.

**Please read the guidelines and instructions carefully.** If you have any questions or need additional information, please do not hesitate to email Mrs. Maxine Robinson, Scholarship and Educational Programs Committee Chair at omz2vp@gmail.com.

Sincerely,

Tjwana Merial Dennis, Scholarship Sponsor

Maxine Robinson, Omega Mu Zeta Scholarship Committee Chairperson

Linda Robinson, Omega Mu Zeta Chapter President



## ZETA PHI BETA SORORITY, INC. OMEGA MU ZETA CHAPTER GUIDELINES FOR 2020 ACADEMIC YEAR ANY APPLICATION NOT MEETING THESE GUIDELINES WILL BE DISQUALIFIED

- This scholarship is for a graduating female senior attending a four (4) year college/university, from high school in our service area of Middlesex County and/or the daughter of a Zeta Phi Beta Sorority, Inc - Omega Mu Zeta Chapter member and/or Omega Mu Zeta Youth Auxiliary member. This scholarship is for female applicants who are African descent who are majoring in Nursing and/or Social Work.
- 2. Only **completed applications** will be reviewed. If sections of the application are not applicable to you, please note it by answering "N/A."
- 3. Please include your complete permanent mailing address, phone number and email address (*if applicable*) on the application.
- 4. Current headshot photo.
- 5. Submit **TWO** (2) letters of recommendation, one from a non-relative (friend, neighbor, minister, etc.) and another from a current or recent administrator or teacher. Letters must be current, dated, and include original signatures.
- 6. **Proof of Community Service** and **number of hours completed no less than 100 hours.** (includes certified documentation from community organization ie. certified letter, certificate, or school transcript of service). **\*\*You cannot just list your hours, we need official proof**\*\*
- 7. Submit current transcript with official school stamp, embossed seal, or authorizing signature of school official. Transcript should include current GPA, Class Rank, and ACT/SAT score. Home-schooled students must have their transcripts and SAT/ACT scores verified by an authorized home school administrator. (Signature/Position in school/administrator with phone # for verification.)
- 8. Submit current 2019-2020 semester/cycle grades.
- 9. **Proof of acceptance** to a four (4) year college/university.

10. Submit a typed personal essay between 500-750 words that addresses the following question:

- Why should you be considered to receive the health sciences scholarship?
- What have you done so far to benefit your community?
- How will you use your college education to benefit your community in the future?
- 11. For High School Official Use Only Your guidance counselor/home school administrator must complete the section at the bottom of the application requesting GPA, rank, and SAT/ACT score information.
- 12. All recipients will be sent 1 parent/guardian ticket to "Zeta Youth Rocks" event on Saturday, May 30, 2020. Any additional ticket (s) will cost \$30. You must attend the event in order to receive the scholarship. All scholarship winners who do not attend will forfeit their scholarship.
- 13. The application must be **completed and postmarked** to the **Scholarship Committee** Chairperson c/o Maxine Robinson – 2 Gary Court Somerset, NJ 08873 no later than Sunday, February 9, 2020. All applications must contain all enclosures and be mailed in one packet only. Applications that are submitted late will not be considered.

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## **INTERNAL REVENUE SERVICE PUBLICATION 520**

A qualified scholarship is any amount you receive as a scholarship or fellowship grant that is used according to the condition of the grant for:

- 1. Tuition and fees required to enroll in, or to attend, an educational institution, or
- 2. Fees, books, supplies, and equipment that is required for the courses of instruction at the educational institution.

# **SECTION I** – Contact Information (please type)

| Students First Name:   | S               | Students Last Name:   |   |
|--|-----------------|-----------------------|---|
| Email Address:   |                 |                       |   |
| Full Address:  |                 |                       |   |
| Home Number:   |                 | Cell Number:          |   |
| How did you hear about our schol                                       | larship? Omega  | Mu Zeta Website, Gu   | uidance Counselor or Other                |
| SECTION II – High School Info  | rmation         |                       |   |
| High School Name:  |                 |                       |   |
| Address:   |                 |                       |   |
| City   | State           | Zip                   | Counselor's Phone Number                  |
| An official high school transcrip                                      | ot must accompa | any this application. |   |
|  |                 | • •                   |   |
|  |                 |                       |   |
|  |                 |                       |   |
| <b>SECTION III</b> – Community Serv                                    | vice            |                       |   |
| Please attach a list of all commu<br>number of hours and official proo |                 |                       | ich you have participated, along with the |
|  |                 |                       |   |
|  |                 |                       |   |
| SECTION IV – Hardship  |                 |                       |   |

Explain any hardships (ex. financial, family circumstances, illness) – Please attach an additional sheet if needed.

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#### **SECTION V** – Seal of Application

I have fully read and understand the guidelines of this application. If for some reason I am not able to fulfill the request of participating with the "Zeta Youth Rocks" I will forfeit this scholarship.

Student Signature

Parent/ Guardian's Signature

## For High School Official Use Only

Have your High School Guidance Counselor/Home School Administrator complete this section.

GPA \_\_\_\_\_ # of Graduating Seniors \_\_\_\_\_ Rank \_\_\_\_\_ Highest SAT/ACT Score \_\_\_\_\_ (GPA is computed on a \_\_\_\_\_\_ scale)

School Official Print Name

School Official Signature

Title

Date