

## Dave Beasley Scholarship APPLICATION

Please read all the information below to see if eligible

#### ABOUT THE DAVE BEASLEY SCHOLARSHIP PROGRAM

The Stepping Stones Foundation in conjunction with the Mu Mu Mu Chapter of the Omega Psi Phi Fraternity, Inc. offers the Dave Beasley Scholarship to high school seniors in the Douglas, Carroll and Paulding Counties who have demonstrated outstanding achievements and moral character in their school and community

### **QUALIFICATION INFORMATION**

Applicants must be a current graduating senior in the Douglas, Carroll or Paulding Counties School Systems who plan to enroll full time in an accredited two-year or four-year college or University in the United States for the 2024-2025 Academic Year. Must have a 3.0 GPA.

Applicants are asked to describe outstanding achievements in an activity or project that occurred in their school or community. Consideration will also be given to academic and attendance records over the past four years.

#### **HOW IT WORKS**

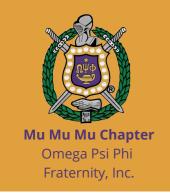
Scholarships must be used for educational expenses at an accredited two-year or four-year college or university in the United States for a full-time course of study. Full-time study is defined as full-time enrollment for the entire 2024-2025 academic year.

#### **APPLICATION PROCESS**

To apply, please complete the application package and submit with a recommendation/appraisal letter included by *April 26, 2024*.

RETURN COMPLETED PACKAGE BY MAIL TO: Stepping Stones Foundation Mu Mu Mu Chapter Omega Psi Phi Fraternity, Inc. Scholarship Chairman 6000 Stewart Parkway, #6142 Douglasville, GA 30135





## APPLICATION

Please read all the information below to be qualified

#### **APPLICATION REQUIREMENTS**

The student is responsible for submitting all materials by *April, 26, 2024*. This application becomes complete and valid only when all of the following materials are received. Incomplete packages will not be evaluated. Please read the following information below.

- Student Application with completed Applicant Appraisal
- Current complete transcript(s) of Grades (3.0 or higher)
- All materials, including transcript should be received in the same 9" x 12" envelope

#### PACKAGES MUST BE POSTMARKED BY APRIL 26, 2024 TO QUALIFY.

The Scholarship will be given upon verification of college or university enrollment.

#### CERTIFICATION

The Dave Beasley Scholarship Committee has the sole responsibility for selecting recipients based on criteria as set forth in the scholarship application. This application becomes the property of the Scholarship Committee; therefore, it is recommended that you keep a copy for your files. The committee will not be responsible for lost, late or misdirected, mutilated, incomplete, illegible or postage-due mail.

I acknowledge that the decisions of the Dave Beasley Scholarship Committee are final. I certify that I meet the eligibility requirements of the program, as described in the guidelines and the information provided are complete and accurate to the best of my knowledge. If requested, I will provide proof of information I have given on this form. Falsification of information may result in termination of any award granted. If selected as a scholarship recipient, I give the Dave Beasley Scholarship Committee permission to release my application, transcript, photograph and supporting documents to the sponsor for promotional and publicity purposes.

Applicant's Full Name:	Parent's Full Name:
Applicant's Signature:	Parent's Signature:



# APPLICATION

Please complete the application and submit by April 26, 2024

#### **APPLICANT INFORMATION**

Full	Name	:												
Full	Address	:												
E-M	ail	:						Phone :						
Date	e Of Birth	: D	D	м м	YY	Y								
HIG	н ѕсно	OL IN	NFOF	RMAT	ION									
Scho	ol Name	:												
Scho	ol Address	:												
Phon	e Number	:							Date	e of Gr	aduat	ion :	М	Υ
PAF	RENT/GU	JARD	IAN	INFO	RMA	TION								
Full N	Name	:												
Full A	Address	:												
Е-Ма	il	:					Di	Phone :						
Relat Appli	ionship to cant	:												
	CITIZEN	INFO	)RM	ATION	<b>N</b> Che	eck all t	that a	applies.						
1.	Are you a							erica?	ı	Ye	s	No		
2.	Are you a	a legal	U.S. I	Reside	nt?					Ye	s	No		
3.	Please in	dicate	your	currer	nt stati	us:								



## APPLICATION

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4 yr. College /University

#### **POST-SECONDARY SCHOOL INFORMATION**

College Name :		
Major Subject :		
TRANSCRIPT INFORMATION		
An official high school transcript of grade explanation of the high school's grading appropriate school official.		
Cumulative GPA (3.0 or higher)	SAT Score	ACT Score
School Official's Name	Date:	NA .
23.12.1.2.1.3.3.12.1.12		
Position:	Phone:	M

#### PLEASE SUBMIT APPLICATION AND REQUIRED INFORMATION TO:

#### STEPPING STONES FOUNDATION

Mu Mu Mu Chapter Omega Psi Phi Fraternity, Inc.
Scholarship Chairman
6000 Stewart Parkway, #6142
Douglasville, GA 30135

SUBMISSION DEADLINE IS APRIL 26, 2024

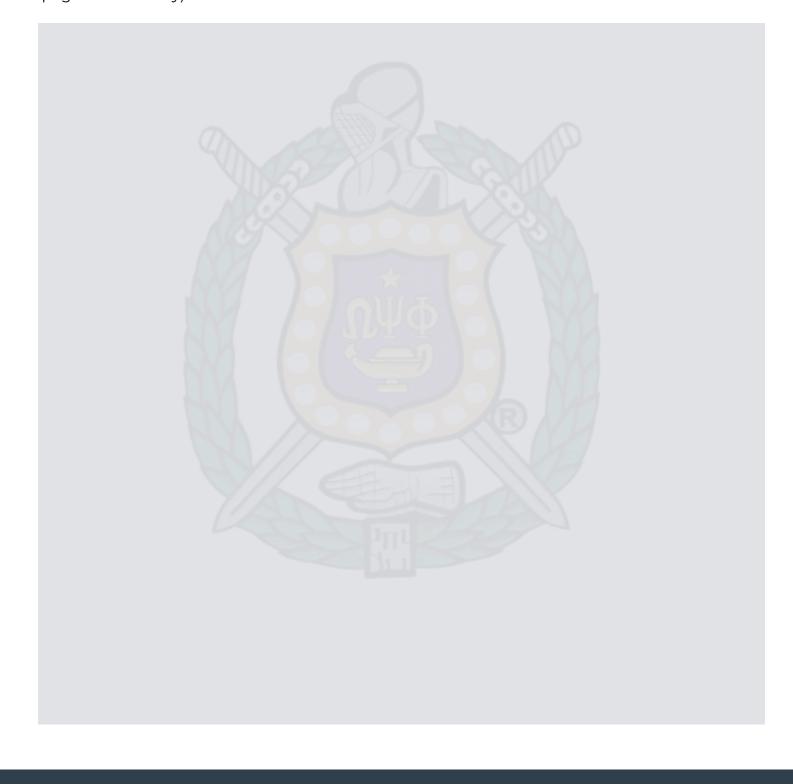


## **ACHIEVEMENTS**

Please complete the application and submit by April 26, 2024

#### **OUTSTANDING ACHIEVEMENT**

Describe in detail one (1) outstanding non-academic achievement that you have accomplished. Your achievement may be an activity or project in school or in your community. (Add additional pages if necessary)





## **EXTRACURRICULAR ACTIVITIES**

Please complete the application and submit by April 26, 2024

#### **ACTIVITIES, AWARDS AND HONORS**

List all school activities in which you have participated during the past four years (e.g. Class President, AP Honors, Sports, any extra curricular activities.)

ACTIVITY	AWARDS/ HONOR	# OF YEARS PARTICIPATED



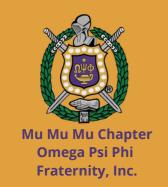
## **APPLICANT APPRAISAL**

This section is required and must be completed in the format provided.

#### **APPLICANT APPRAISAL INFORMATION**

This section is to be completed by an unrelated adult who is familiar with your outstanding achievement. If incomplete, your application will not be evaluated.

<u>To the Appraiser:</u> You have been asked to provide information in support of this application. When completed, please return to the applicant. A letter of recommendation will also be accepted.



## **APPLICANT APPRAISAL**

This section is required and must be completed in the format provided.

#### **QUESTIONAIRE (CONTINUED)**

In this section please check the box that best applies to the question being asked.

	mpared with other similar students' accomplishments. You would best describe the blicant's achievement as
	Far exceeded expectations
	Exceeded expectations
	Met expectations
	Somewhat met expectations
Th	e applicant demonstrated initiative and self-motivation
	Consistently
	Most of the time
	Sometimes
	Infrequently .
Th	e likelihood the applicant will continue to engage in similar activities or projects is
	Very High
	Moderately High
	Probable
	Unlikely
l've	answered the above questions true and accurate to the best of my knowledge.
App	praiser's Name (Print)  Date
— App	praiser's Signature