

PI LAMBDA PHI

EDUCATIONAL FOUNDATION

**2020-2021 Scholarship Application & Release Form**

**Qualifications:**

* GPA 3.0 or above (on a 4.0 scale or equivalent)
* Any full-time undergraduate Brother who will also be enrolled full-time as an undergraduate in the coming semester
* Considered “in good standing” with chapter, IHQ, and federal, state and local governments
* Completed application

**Complete Applications Consist Of:**

* Scholarship Application & Release Form
* Resume
* Letter of Recommendation Form
* Unofficial Transcript
* Headshot Photo of Applicant (JPEG)
* Online Video Interview

**Directions:**

Submissions must be transmitted in **PDF format** to [scholarship@pilambdaphi.org](mailto:scholarship@pilambdaphi.org). The submission deadline for application forms, letter of recommendation form, resume, unofficial transcript, and an appropriate headshot photo (JPEG format) of yourself is by the close of March 19, 2021. The deadline for video interview is by the close of March 26, 2021. Applicants will be added to the video interview process as soon as their materials are provided and reviewed.

The Educational Foundation cannot process incomplete applications, nor will the Educational Foundation contact an individual noting application deficiencies. Video interviews require web cam access.

A representative of the Educational Foundation will contact each scholarship applicant by email, within two business days of submittal, and provide their unique video interview username and password.

A representative of the Educational Foundation will contact each scholarship winner by email on or before May 3, 2021.

Please submit only one application, regardless of the scholarship you believe you are most qualified to receive, because the Educational Foundation considers each application with the criteria of all the different scholarships in mind. Thus, one application renders the applicant eligible for all the available scholarships.

For questions, please contact [scholarship@pilambdaphi.org](mailto:scholarship@pilambdaphi.org).

**PART 1: GENERAL INFORMATION**

PERSONAL & CONTACT

NAME

ADDRESS

Street

Zip code

State

City

BIRTH DATE

CELL PHONE       EMAIL

INSTITUTION & EDUCATION

SCHOOL       CHAPTER

Example (CT Alpha Omega Chapter)

INITIATION DATE

PROGRAM/DEGREE

MAJOR (1)       MAJOR (2)

CUM GPA       GPA SCALE

GRADUATION DATE

STUDENT ID #

OFFICE FOR TUITION PAYMENT (FINANCIAL AID, BURSAR, PAYMENT PROCESSING, ETC.)

OFFICE NAME

ADDRESS

Street

Zip code

State

City

**PART 2: FINANCIAL STATEMENT**

*All financial information will remain confidential.*

TUITION (check what applies)

Parents (equivalent) aid in paying tuition

You are dependent with cost of tuition

You work a full/part time job while classes are in session

If yes, please state number of hours and pay

|  |
| --- |
|  |

Awarded any scholarships/grants

If yes, please name and amount

|  |
| --- |
|  |

Commute from home residence

Live in campus housing

Live in chapter housing

Live in off-campus housing other than the chapter house

ANNUAL COSTS (please give estimates of following areas)

Tuition

Books

**Release of Information**

In accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA), I hereby authorize Pi Lambda Phi Educational Foundation to release personally identifiable information from my education records, including but not limited to major, activities, grade point average, financial need information, and other information to donors who will be considering me for the scholarship for which I have applied. This release of information is necessary for the selection process for the award. I also authorize the Pi Lambda Phi Fraternity and Pi Lambda Phi Educational Foundation to periodically release personally identifiable information to the scholarship donor for the purpose of updating the donor on my progress. I understand that (1) I have the right not to consent to the release of my education records under FERPA; (2) I have the right to receive a copy of such records upon request; (3) and that this consent shall remain in effect until revoked by me, in writing, and delivered to Pi Lambda Phi’s International Headquarters.

I am in good standing with my chapter, and my institute of higher learning.

No

Yes

I am willing to write a thank you letter the Educational Foundation can send to donors.

No

Yes

I am willing to record a thank you video the Educational Foundation can send to donors.

No

Yes

Scholarship Applicant Name (Print)

Scholarship Applicant Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date