

6401 101st Street
Ewa Beach, HI 96706
www.hawaiipanhellenic.net
HAPAScholarship@gmail.com

2018 COLLEGIATE SCHOLARSHIP APPLICATION

To apply for a Honolulu Alumnae Panhellenic Association 2018 Scholarship, please complete this application in full. This form is available at www.hawaiipanhellenic.net.

PLEASE TYPE APPLICATION. DEADLINE IS MARCH 15, 2018 AND THE COMPLETED APPLICATION AND ALL REQUIRED DOCUMENTS MUST BE RECEIVED BY THIS DATE.

NAME _____ BIRTH DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER _____ EMAIL _____

UNIVERSITY _____ SORORITY _____

HAVE YOU RECEIVED A SCHOLARHIP FROM HAPA PREVIOUSLY? _____

NAME OF PARENTS OR GUARDIAN(S) _____

ADDRESS *(if different from above)* _____

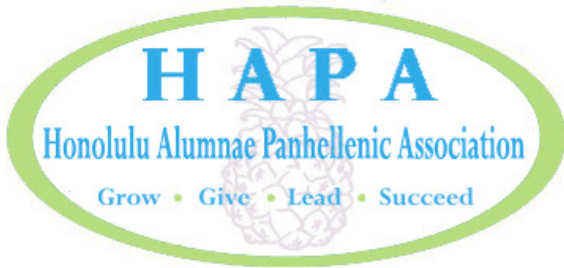
TELEPHONE NUMBER *(if different from above)* _____

HIGH SCHOOL ATTENDED	CITY, STATE	GRAD YEAR
_____	_____	_____

COLLEGE(S) ATTENDING/ATTENDED	CITY, STATE	YEAR(S)
_____	_____	_____
_____	_____	_____
_____	_____	_____

COLLEGE UNITS COMPLETED _____ EXPECTED GRAD DATE _____

COLLEGE cum GPA _____ COLLEGE GPA last semester or quarter _____



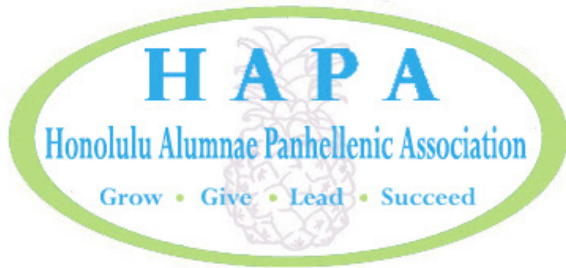
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PLEASE ANSWER THE FOLLOWING QUESTIONS WITHIN THE SPACE ALLOTTED BELOW.

COLLEGE ACTIVITIES: *Please provide the year(s) participated & approximate hours per week.*

COMMUNITY ACTIVITIES: *Please provide the year(s) participated & approximate hours per week.*

COLLEGE HONORS, AWARDS, LEADERSHIP POSITIONS:

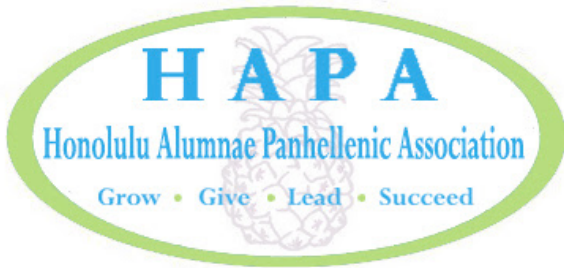


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IF YOU HAD THE AUTHORITY TO CHANGE YOUR SCHOOL IN A POSITIVE WAY, WHAT SPECIFIC CHANGES WOULD YOU MAKE:

HOW HAS MEMBERSHIP IN YOUR SORORITY IMPACTED YOUR LIFE?

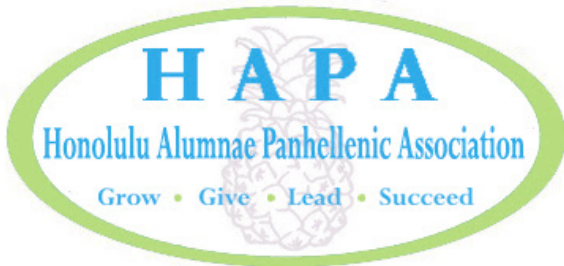
WHO IN YOUR LIFE HAS BEEN YOUR BIGGEST INFLUENCE AND WHY:



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WHY ARE YOU A GOOD CANDIDATE TO RECEIVE THIS AWARD:

DISCUSS HOW YOUR INTEREST IN YOUR FIELD OR MAJOR DEVELOPED **AND** DESCRIBE YOUR EXPERIENCE IN THE FIELD (*such as volunteer work or internships*) AND WHAT YOU GAINED FROM THIS INVOLVEMENT:



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Under the Family Education and Privacy Act of 1974, completion of this form by applicant/parent/guardian authorizes use of this information for Panhellenic purposes. I/we verify that the information contained is true and that I/we understand the scholarship requirements.

APPLICANT SIGNATURE _____ DATE _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____
(If applicant is under age 18.)

Please **email** your completed application and additional required documents to:
hapascholarship@gmail.com

REQUIRED SUPPORTING DOCUMENTS

- Completed application
- Letter of recommendation from chapter advisor
- College transcript to include all work completed

ALL MATERIALS (APPLICATION, LETTER OF RECOMMENDATION, & TRANSCRIPT) MUST BE RECEIVED BY THE DEADLINE.

It is extremely helpful if all materials are included in the same email.

THE DEADLINE IS MARCH 15, 2018.