

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

**2018 GRADUATE 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](http://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 SCHOLARSHIP FROM HAPA PREVIOUSLY? \_\_\_\_\_

NAME OF PARENTS OR GUARDIAN(S) \_\_\_\_\_

ADDRESS (if different from above) \_\_\_\_\_

TELEPHONE NUMBER (if different from above) \_\_\_\_\_

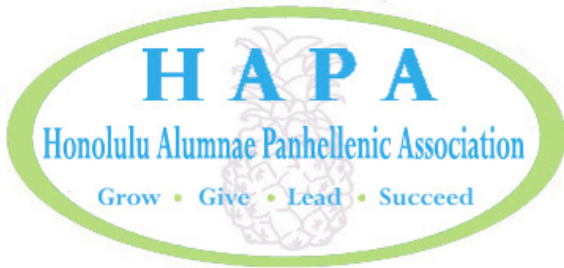
COLLEGE ATTENDED	CITY, STATE	GRAD YEAR
_____	_____	_____

COLLEGE cum GPA \_\_\_\_\_

GRADUATE SCHOOL(S) ATTENDING/ATTENDED	CITY, STATE	YEAR(S)
_____	_____	_____
_____	_____	_____

GRADUATE UNITS COMPLETED \_\_\_\_\_ EXPECTED GRAD DATE \_\_\_\_\_

GRADUATE cum GPA \_\_\_\_\_ GRADUATE GPA last semester or quarter \_\_\_\_\_



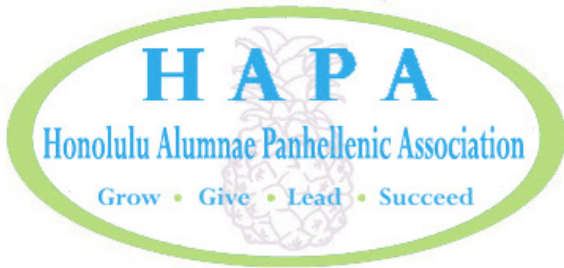
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PLEASE ANSWER THE FOLLOWING QUESTIONS WITHIN THE SPACE ALLOTTED BELOW.

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

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

COLLEGE/GRADUATE/COMMUNITY HONORS, AWARDS, LEADERSHIP POSITIONS:

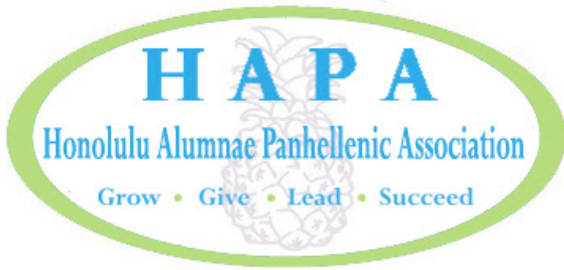


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ARE YOU PRESENTLY EMPLOYED? *If so, please list where you work & average hours worked per week.*

HOW WILL YOUR STUDY OF \_\_\_\_\_ CONTRIBUTE TO YOUR IMMEDIATE OR LONG RANGE CAREER PLANS:

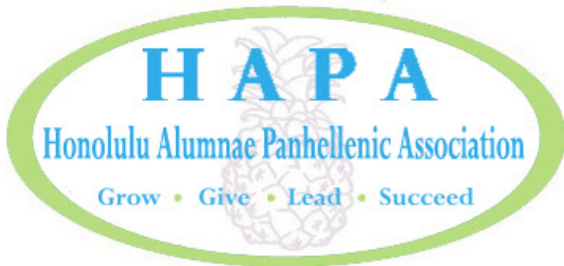
HOW DID MEMBERSHIP IN YOUR SORORITY IMPACT YOUR LIFE?



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HOW HAVE YOU CONTRIBUTED TO YOUR SORORITY & THE PANHELLENIC COMMUNITY?

WHY ARE YOU A GOOD CANDIDATE TO RECEIVE THIS AWARD?



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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](mailto:hapascholarship@gmail.com)

**REQUIRED SUPPORTING DOCUMENTS**

- Completed application
- Letter of recommendation from chapter advisor or alumnae association president
- College transcript to include all work completed
- Acceptance letter to graduate school

**ALL MATERIALS (APPLICATION, LETTER OF RECOMMENDATION, TRANSCRIPT, & COLLEGE ACCPETANCE LETTER) 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.**