



**SAN DIEGO ALUMNAE PANHELLENIC
2012 MERIT SCHOLARSHIP APPLICATION**

*To apply for a San Diego Alumnae Panhellenic 2012 Merit Scholarship,
please complete this application in full.*

PLEASE TYPE APPLICATION OR PRINT NEATLY. IF YOU NEED MORE SPACE, PLEASE USE ADDITIONAL SHEETS OF PAPER. ILLEGIBLE APPLICATIONS WILL NOT BE CONSIDERED. DO NOT CHANGE FORMAT.

DEADLINE IS MARCH 31, 2012 AND THE COMPLETED APPLICATION MUST BE RECEIVED BY THIS DATE.

NAME _____ BIRTH DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER _____ E-MAIL _____

NAME OF PARENT(S) OR GUARDIAN(S) _____

ADDRESS *(if different from above)* _____

TELEPHONE NUMBER *(if different from above)* _____

HIGH SCHOOL(S) ATTENDED	CITY, STATE	YEAR(S)
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HIGH SCHOOL G.P.A. _____	CLASS RANK _____	SIZE _____
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PLEASE ANSWER THE FOLLOWING QUESTIONS ON SEPARATE SHEETS OF PAPER. LIMIT YOUR RESPONSES TO 3 SHEETS TOTAL (AND ANSWER QUESTIONS 1 – 6 ON ONE PAGE). PLEASE TYPE YOUR RESPONSES USING 12 pt FONT.

1. SCHOOL ACTIVITIES: *Please provide the year(s) participated & approximate hours per week.*
2. COMMUNITY ACTIVITIES: *Please provide the year(s) participated & approximate hours per week.*
3. HONORS, AWARDS, LEADERSHIP POSITIONS
4. INTERESTS & HOBBIES
5. ARE YOU PRESENTLY EMPLOYED? *If so, please list where you work & average hours worked per week.*
6. COLLEGE FRATERNITY OR SORORITY AFFILIATION OF RELATIVES: *Include full name, relationship and sorority or fraternity affiliation of each relative.*
7. IF YOU ARE CONSIDERING GOING THROUGH PANHELLENIC RECRUITMENT, WHAT DO YOU HOPE TO GAIN FROM SORORITY LIFE?
8. HOW WOULD THIS SCHOLARSHIP BENEFIT YOU?
9. TO WHICH COLLEGES/UNIVERSITIES HAVE YOU APPLIED FOR ADMISSION? *If you have already been accepted to one or more schools, please list all the schools you have applied to and note which ones have accepted you. If you have decided which college you plan to attend, please note that, as well.*

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 _____

Please **mail** your completed application to: **Elyse Wilhm**
San Diego Alumnae Panhellenic
5663 Balboa Ave #514
San Diego, CA 92111

For more information please contact Elyse via email sdap.scholarship@gmail.com.

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

*It is extremely helpful if all materials are included in the same envelope.
 Unless all materials are received in the same mailing, there is no assurance your application will be read.*

THE DEADLINE IS MARCH 31, 2012.