

The Sarasota (FL) Alumni Chapter of Kappa Alpha Psi Fraternity, Inc. P. O. Box 573

Tallevast, FL 34270

"Training for Leadership Since 1911"

Dear Educational Partner/Parent/Friend:

Each year the **Sarasota** (FL) **Alumni Chapter of Kappa Alpha Psi Fraternity Inc** sponsors the **Annual Steve Lewis Achievement Awards Banquet**. At this year's Banquet, we will announce the winners of our scholarships awarded based on academic achievement and economic need. Please nominate students from your school, neighborhood, church, or family for consideration.

All applicants must meet the following criteria:

- 1. A female student from Manatee or Sarasota County.
- 2. A 2023/2024 incoming or current nursing or technical or college school student.
- 3. Have a minimum unweighted GPA of 2.0.
- 4. Be in good academic standing at your respective technical school or college.
- 5. Present two letters of recommendation from a school representative.
- 6. Present an official sealed transcript.
- 7. Present a letter of acceptance from a university/college.

Attached please find a copy of a **Scholarship Application Form** to be completed by the applicant and parent/guardian. A completed packet must be returned via mail to Sarasota (FL) Alumni Chapter of Kappa Alpha Psi Fraternity Inc. P.O. Box 573, Tallevast, FL 34270 by **Friday, February 2nd, 2024.**

Mandatory interviews will be conducted for all nominees in early *March 2024* at the Steve Lewis Center at <u>1720 26th Ave. East, Bradenton, FL.</u> Nominees will be notified in advance of the exact time of their scheduled interview. Finalists will be notified in writing of their status by mid-March. Applications must be legible; if the application is not legible it may affect your application decision. You may use additional space for responses if required. Electronic form completion (MS Word) is encouraged.

If you have any questions or require any additional information, please get in touch with *Mr. C. K. Moore at 904.536.0322.*

Sincerely,

Darren L. Gambrell

Darren L. Gambrell

Polemarch Sarasota (FL) Alumni Chapter



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NURSING SCHOLARSHIP APPLICATION

Name	Date of Birth		
Address	City	State	
Phone (ell		
Email			
Educational Plans and Objectives			
Extra-Curricular Activities:			
Family Information (All information required)			
Father's Name		Combined income Range (Circle) \$0-\$50,000 \$50,000 - \$100,000	
Father's Occupation	\$50,00		
Mother's Name Mother's Occupation	\$100,000 0 \$150,000 \$150,000		
Number of dependent children in your family (including		•	
Have you applied for admission to a College or University	? Have y	ou been accepted	
Have you completed the FASFA	Are you eligible for Bright Futures		
ACT Composite	SAT		
Please attach an official copy of your Transcrip class ranking), an acceptance letter from a coll recommendation.	t (which includes the	e cumulative GPA and	
On a separate sheet explain any circumstance assist the Committee in assessing your financia		ancial situation that will	
The signatures below acknowledge that the inf best of our knowledge. We will inform the regarding this information.			
Signature of Parent/Guardian	Signature of St	udent/Applicant	

All information contained on this application will remain and be used exclusively by the Sarasota (FL) Alumni Chapter of Kappa Alpha Psi Inc Scholarship Committee and Board of Directors for the sole purpose of determining scholarship winners.