

Application of:

\_\_\_\_\_  
Last Name      First Name      MI

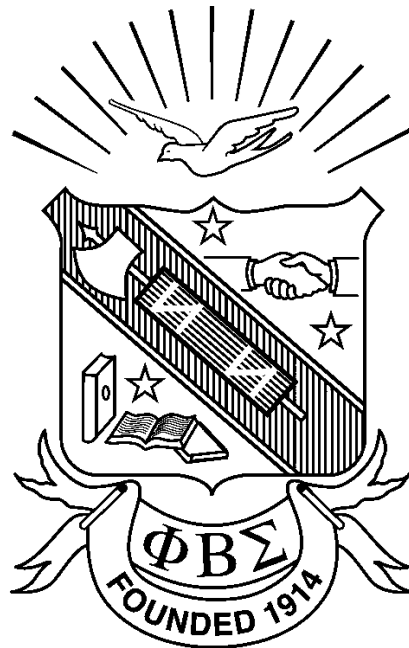
\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City              State              Zip Code

\_\_\_\_\_  
(Area Code)      Telephone Number

PHI BETA SIGMA FRATERNITY, INC.  
OMICRON SIGMA CHAPTER

KENDALL BECK SCHOLARSHIP  
APPLICATION



Phi Beta Sigma Fraternity, Inc.  
Omicron Sigma Chapter  
P. O. Box 295381  
Lewisville, TX 75029

**All scholarships are a one-time award. The scholarships will be awarded to graduating high school seniors in the amount of \$1000.00 each.**

**Eligibility Criteria**

- A. High School graduating senior
- B. Minimum GPA of a 3.0
- C. Must be a resident of Dallas, Collin, Denton or Tarrant counties
- D. Must be applying to a college with a fall matriculation date

**Deadline for Submission**

All entries must be postmarked no later than Saturday April 1, 2017.

**Application Requirements**

- A. Completed application
- B. Official Transcripts
- C. 3 X 5 headshot photo
- D. **Three letters** of recommendation; at least one personal source (parent, guardian, relative or friend) and at least one professional source (school principal, department head, guidance counselor, etc.)
- E. Signed media waiver to use image for Phi Beta Sigma press releases and stories

**Method of Selection**

- A. All applications are reviewed by the Kendall Beck scholarship committee.
- B. Scholarships will be given to students based upon the total rubric score. (A rubric is attached to the application for perusal.)

**Method of Scholarship Distribution**

All scholarship winners must be present at the Kendall Beck Scholarship Luncheon in May 2017. You will be notified of the exact date of the luncheon as a part of the selection process. All scholarship recipients must submit all requests for scholarship disbursement by requesting the school registrar (on school letterhead) to send proof of enrollment status to the organization mailing address. All requests should be postmarked no later than Saturday October 14, 2017, showing fulltime fall enrollment. **If proof of enrollment is not received by Saturday October 21, 2017, the scholarship will be forfeited.** Scholarship checks will be dispersed by the first week of November 2017.



**PHI BETA SIGMA FRATERNITY, INC.**  
Omicron Sigma Chapter (Greater North Dallas)

Dear Applicant:

We would like to thank you for your interest in the Phi Beta Sigma, Omicron Sigma Kendall Beck scholarship. The requirements of the scholarship are as follows:

1. Must be a student living in the Dallas, Denton, Collin, or Tarrant Counties
2. Must be a minimum 3.0 GPA on a 4.0 scale (or converted equivalent for 5.0 or 6.0 scales)
3. Must be a high school graduating senior

In addition to the aforementioned requirements, all applicants must provide a one-page essay response to the question provided at the end of the application. In addition, all applicants must also provide **three** letters of recommendation with at least one from each the following categories:

- a. Personal source (parent, guardian, relative or friend)
- b. Professional source (school principal, department head, guidance counselor, etc.)

After you have completed the application, utilize the checklist to make sure that all necessary documents arrive as a single package. We look forward to your application and wish you the best of luck and continued success in your future endeavors.

Warmest Regards,

Kevin Dillon  
Director of Education – Omicron Sigma Graduate Chapter  
Phi Beta Sigma Fraternity, Inc.  
Greater North Dallas, TX



**School Information**

*Name* \_\_\_\_\_ *District* \_\_\_\_\_  
*Address* \_\_\_\_\_ *Telephone* \_\_\_\_\_  
*Class Rank* \_\_\_\_\_ *Total in Graduating Class* \_\_\_\_\_

Confirmed By (Name, title) \_\_\_\_\_ Signature \_\_\_\_\_

*College/University* \_\_\_\_\_

*Intended Major* \_\_\_\_\_

Please list any civic or community based organizational involvements and dates.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any extracurricular activities and dates of involvement

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Awards/Recognitions and Dates

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please attach a one-page response to the essay prompt listed below. Please double-space your submission and do not use a font larger than 12pt.**

*From a financial standpoint, what impact will this scholarship have on your education?*

Please utilize the following checklist to ensure that you have completed the application in its entirety.

\_\_\_\_ Completed application

\_\_\_\_ Official Transcripts

\_\_\_\_ Attached Essay

\_\_\_\_ Verification of GPA and class rank

\_\_\_\_ 3 letters of recommendation

\_\_\_\_ 3 X 5 headshot photo



**PHI BETA SIGMA FRATERNITY, INC.**  
Omicron Sigma Chapter (Greater North Dallas)

*Media Release Form*

I grant permission to Phi Beta Sigma Fraternity, Incorporated – Omicron Sigma Chapter to use my image (photographs and/or video) for use in Phi Beta Sigma Fraternity, Incorporated – Omicron Sigma Chapter publications including videos, email blasts, recruiting brochures, newsletters, and magazines and to use my image in electronic versions of the same publications or in the Phi Beta Sigma Fraternity, Incorporated – Omicron Sigma Chapter website or other electronic forms of media.

I hereby waive any right to inspect or approve the finished photographs or electronic matter that may be used in conjunction with them now or in the future, whether that us is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the image.

Please check the paragraph below which is applicable to your present situation:

\_\_\_\_\_ I am 18 years of age or older and I am competent to the contract in my own name. I have read this release before signing below and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

\_\_\_\_\_ I am the parent or legal guardian of the below named child. I have read this release before signing below and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Name (please print): \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent or legal guardian: \_\_\_\_\_  
(If student is under 20 years of age)

**KENDALL BECK SCHOLARSHIP APPLICATION  
EVALUATION RUBRIC**

1. Biographical Information (3 points possible)

<b>Inadequate (1 Point)</b>	<b>Adequate (2 Points)</b>	<b>Exceptional (3 Points)</b>
Student's biographical page is incomplete and/or difficult to read.	Student's biographical page is mostly complete and is mostly legible.	Student's biographical cover page is complete and legible.

• Points Awarded \_\_\_\_\_

Adequate is:

- Student name
- Address or phone number
- Name of high school
- GPA
- Student signature
- Photo

\*Strengths:

\*Weaknesses:

2. Student Essay (9 point possible)

Read the student's essay and assign a point value that most closely matches the criteria below:

<b>Inadequate (1-3 Points)</b>	<b>Adequate (4-6 Points)</b>	<b>Exceptional (7-9 Points)</b>
Unclear or inconclusive evidence of student's intent to pursue postsecondary education	Identifies student's intent to pursue a postsecondary education	Clearly indicates the student's intent to pursue postsecondary education
Lacks clear plans for how scholarship will assist education plan	Provides evidence of how scholarship will assist education plan	Clearly addresses how the scholarship will assist education plan

• Points Awarded \_\_\_\_\_

\*Strengths:

\*Weaknesses:



3. Letters of Recommendation (9 possible points)

Read the student's letters of recommendation and assign a point value that most closely matches the criteria below:

<b>Inadequate (1-3 Points)</b>	<b>Adequate (4-6 Points)</b>	<b>Exceptional (7-9 Points)</b>
Provides few positive observations about the student and their academic ability	Provides positive observations about the student and their academic ability, but does not identify specific examples of accomplishments	Clearly indicates positive and enthusiastic observations regarding the student and their academic ability and provides examples related to those observations

• Points Awarded \_\_\_\_\_

\*Strengths:

\*Weaknesses:

4. Persuasiveness (9 possible points)

Does the application demonstrate the student's need for the scholarship?

<b>Inadequate (1-3 Points)</b>	<b>Adequate (4-6 Points)</b>	<b>Exceptional (7-9 Points)</b>
The application is not compelling.	The application is compelling.	The application is extremely compelling. Student's application stands out above other candidates.

• Points Awarded \_\_\_\_\_

\*Strengths:

\*Weaknesses: