



Zeta Phi Beta Sorority, Incorporated  
Gamma Lambda Zeta Chapter  
P.O. Box 9905  
Daytona Beach, FL 32120

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**Zeta Phi Beta Sorority, Incorporated  
Gamma Lambda Zeta Chapter  
2020-2021 Scholarship Application**

This scholarship will **ONLY** be awarded to a 2020-2021 high school graduating senior in Volusia County Schools. The recipient will receive a scholarship in the amount of \$1,000 upon completion of the items listed below. The recipient will be contacted by Thursday, April 1, 2021.

*Instructions for Completing Your Application*

- The completed application including the items listed below must be postmarked by **Monday, March 15, 2021** and mailed to P.O. Box 9905, Daytona Beach, FL 32120. Applications with a postmark later than **Monday, March 15, 2021** will not be accepted. For inquiries, contact Jasmine Taylor at glzdaytona@gmail.com or 386-244-7688.
- The applicant must have a **cumulative GPA of 3.0 or higher**, which must be verified by a **copy of an official (sealed) transcript** submitted with the application.
- The applicant must submit **two letters of recommendation**. Relatives of the applicant are excluded from providing letters.
- The applicant must submit an **autobiography** that includes your academic and career goals. The essay **must be typed in black ink** and 300-500 words. Use 8 ½” x 11” unlined white paper. Do not type on the reverse side of the paper.
- The applicant must submit proof of community service. You must attach a verified printout of your volunteer hours with your total hours, a signature from your school counselor, and the date.
- The applicant must submit a recent headshot (photo). Your photo will not be released or displayed without your expressed, written consent.
- **If selected**, the recipient must show proof of enrollment and full-time status at an accredited college or university. The recipient must use the website **www.studentclearinghouse.org** to verify enrollment and full-time status. You must also use the scholarship within one year of the enrollment date.



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## Information Sheet

Applicant's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Parents/Legal Guardians: \_\_\_\_\_

If the address is the same as above, please check the box:  If not, please fill out the information below.

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Current High School

School Name: \_\_\_\_\_ School Counselor: \_\_\_\_\_

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

### College or University Preference

1. \_\_\_\_\_ Accepted: \_\_\_\_\_ yes \_\_\_\_\_ no

2. \_\_\_\_\_ Accepted: \_\_\_\_\_ yes \_\_\_\_\_ no

3. \_\_\_\_\_ Accepted: \_\_\_\_\_ yes \_\_\_\_\_ no

College Major: \_\_\_\_\_

Projected Enrollment Date: \_\_\_\_\_ Summer 2021 \_\_\_\_\_ Fall 2021 \_\_\_\_\_ Spring 2022



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**Leadership:** List any leadership positions held and explain your duties and accomplishments.

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**Achievements:** List any outstanding achievements earned during your high school years. Include the name of the award, who honored you, and date of the award.

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**Extra-curricular Activities:** List any extra-curricular activities you participated in during your high school years. Include the type of activity, your position, and dates.

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**By signing below, I agree that all information is true and accurate to the best of my knowledge.**

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**Signature of Applicant**

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**Date**