

Kappa Alpha Psi Fraternity, Incorporated

Fort Knox (KY) Alumni Chapter



2020 Student of the Year Scholarship Award Application

Kappa Alpha Psi Fraternity, Incorporated
Fort Knox (KY) Alumni Chapter
P.O. Box 318
Fort Knox, KY 40121-318
fortknoxalumnichapter@gmail.com



Dear Students, Parents, and Guardians:

The Fort Knox Alumni Chapter of Kappa Alpha Psi Fraternity, Inc. is accepting applications for our Annual Student of the Year Scholarship Award for 2020 High School Males who are seniors.

Please see the attached application materials for details. The application deadline is May 17, 2019.

All applications will be reviewed and graded at that time and ranked in order. The top two student applicants will be awarded a one-time \$250 Student of the Year Award. The winners will be presented a Check on 12 June 2020 @ Meadow View Elementary school in Radcliff KY.

Please take this time to review the application and we encourage your high school male seniors to apply.

Thank You,

Vince Blackmon

Vince Blackmon
President, Fort Knox (KY) Alumni Chapter
Kappa Alpha Psi Fraternity, Inc.



Kappa Alpha Psi Fraternity, Incorporated | Fort Knox (KY) Alumni Chapter
Guidelines for the 2020 Student of the Year Scholarship Award

QUALIFICATIONS FOR ELIGIBILITY

Qualified applicants must:

- Be a male high school senior who will graduate in the spring of current school year.
- Have a grade point average of at least 2.8 on a 4.0 scale.
- Minority Student

AREAS TO BE JUDGED

- **Awareness:** Awareness of events in all aspects of life: politics, education, world affairs, etc.
- **Career Preparation:** As evidenced by your personal statement and academic preparation.
- **Scholarship:** Grade point average will be determined by official transcript.
- **School/Community Activities:** A listing of school and community activities, organizational memberships, and offices held, etc.

APPLICATION PROCESS

- Typed application. The application must be signed in blue ink.
- Official high school transcript (including SAT/ACT test scores)
- Completed Counselor Evaluation Form (included)
- Two Professional Recommendations. Letters from teachers, mentors, or community/religious leaders are recommended. Letters should be placed in a sealed envelope and returned to the applicant for mailing with the application packet.
- Personal Statement (Essay) of your goals for the future (at least 250 words typed, 500 words maximum)

ALL MATERIALS MUST BE POSTMARKED BY THE APPLICATION DEADLINE OF: May 17, 2020



**Kappa Alpha Psi Fraternity, Incorporated | Fort Knox (KY) Alumni Chapter
Guidelines for the 2020 Student of the Year Scholarship Award**

DATA SHEET

NAME	
AGE	
STREET ADDRESS	
CITY	
STATE	
ZIP CODE	
TELEPHONE (Best contact number)	
E-MAIL ADDRESS	
HIGH SCHOOL	
NAME OF PARENT OR GUARDIAN	
PARENT/GUARDIAN CONTACT NUMBER:	
LIST COMMUNITY ACTIVITIES (attach an additional page if necessary):	
LIST SCHOOL ACTIVITIES, MEMBERSHIPS AND POSITIONS HELD (attach an additional page if necessary):	

PERSONAL STATEMENT: In at least 250 words, but no more than 500 words (essay format), please discuss your goals (personal, academic, and career) for the future. Also, indicate why you should be chosen to receive the 2019 Student of the Year Scholarship Award.
(Please attach a separate personal statement-typed.)

I verify that the information provided in this document is accurate. Further, I understand that I will be disqualified should any information be found false.

Signature of Applicant (in blue ink)

Date



Kappa Alpha Psi Fraternity, Incorporated | Fort Knox (KY) Alumni Chapter
Guidelines for the 2020 Student of the Year Scholarship Award

TRANSCRIPT REQUEST FORM

_____ is a candidate for the Fort Knox (KY) Alumni Chapter of Kappa Alpha Psi, Student of the Year Scholarship Award. A copy of his transcript to date is required to evaluate his academic work for the contest. Kindly mail a copy of the transcript to:

2020 Student of the Year Committee
Kappa Alpha Psi Fraternity, Incorporated
Fort Knox (KY) Alumni Chapter
P.O. Box 318
Fort Knox, KY 40121-318

(Parent/Guardian Signature indicating approval)

Counselor's Signature (if required)

Date

(Candidate must include a completed copy of this form in the packet to indicate that he has requested a transcript.)



Kappa Alpha Psi Fraternity, Incorporated | Fort Knox (KY) Alumni Chapter
Guidelines for the 2020 Student of the Year Scholarship Award

COUNSELOR EVALUATION

Student:	School:
Present grade point average of this student is _____ on a _____ scale. GPA is <input type="checkbox"/> weighted <input type="checkbox"/> unweighted	
Class Rank: This student ranks <input type="checkbox"/> exactly / <input type="checkbox"/> approximately #_____ out of _____ graduating seniors	
In comparison to the college preparatory curriculum offered at your school, this student's course selection is: <input type="checkbox"/> most demanding <input type="checkbox"/> demanding <input type="checkbox"/> average <input type="checkbox"/> below average	
How long have you known this student?	
In the space below, or on an attached sheet, please evaluate this applicant based on academic performance, consistency and potential. Kappa Alpha Psi evaluates candidates using the typical academic indicators, with emphasis on leadership potential and personal determination. <i>Please do not list the student's extracurricular activities, as they are asked for elsewhere in the application.</i>	
Counselor Name:	Counselor Telephone Number:
Counselor Signature:	
Date:	