



Delta Pentaton Alumni Scholarship

This program is funded by the Phi Sigma Kappa Foundation.

Full Name: _____

Home Mailing Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Parent Name(s): _____ Email: _____

Student ID #: _____ Are you a member of Phi Sigma Kappa? _____

Test Scores:

ACT _____ SAT Math _____ SAT Reading _____ SAT Written _____ GPA (cumulative) _____



SCHOOL OFFICIAL'S CERTIFICATION

This is to certify that the applicant named above is a full-time student in good standing at this institution and has a cumulative grade point average of _____ on a grade point system of _____.

Signature _____ Date: _____

Name (typed or printed): _____ Title: _____



LETTER OF RECOMMENDATION

Indicate here the name of the faculty member who you have asked to write a letter of recommendation and the date you made the request:

Name: _____ Date: _____



FINANCIAL INFORMATION

List any scholarships/loans/grants/and their amounts that you have received for the current academic year:



APPLICANT'S CERTIFICATION

_____ I understand that the Delta Pentaton Alumni Scholarships are intended to benefit members of Phi Sigma Kappa, or children of Phi Sigs, who will be full-time students at Northeastern University during the next academic year. Therefore, I certify that at the end of the current academic year, I will have at least one full semester of study to complete before receiving my undergraduate degree.

_____ I also understand that any award I may win will be paid directly to Northeastern University on my behalf in as many installments as there are terms in the next academic year and that payment of any installment is conditional upon my remaining a full-time student in good standing with Northeastern University.



Signature of Applicant

Date

INSTRUCTIONS TO THE APPLICANT

In the spaces provided, type all of the requested information and check the boxes in the Applicant's Certification section to show that you agree to and understand all rules. Mail the completed form, with the following items, to the address listed below.

Enclose with this application the following required items.

_____ An official transcript of credits for all completed courses, bearing the seal of the registrar, from each of the institutions of higher education attended since high school.

_____ A personal resume, describing campus and fraternity (if applicable) activities, honors, interests, and achievements, as well as employment experience and civic endeavors, if any.

_____ A letter of recommendation by an alumnus of the Delta Pentaton Chapter of Phi Sigma Kappa.

_____ A letter of recommendation from a faculty member, attesting to the applicant's scholastic ability. *Note: If school regulations require the letter writer to submit the recommendation directly to the Scholarship Committee, it is the applicant's responsibility to see that the letter is sent prior to the deadline.*

ELIGIBILITY AND AWARDS

The scholarship is available to any Phi Sig, or child of a Phi Sig, who is pursuing full-time undergraduate studies at Northeastern University. Scholarships will be awarded based on the overall quality of the applicant's credentials. The scholarships will be paid directly to Northeastern University on behalf of the recipients. Winners will receive notification on or about May 15.

This application must be postmarked no later than February 28

MAIL TO:

Phi Sigma Kappa International Headquarters
Attn: Scholarship Coordinator
2925 East 96th Street
Indianapolis, IN 46240