



# Memo

**To:** High School Counselors

**From:** Jaliza Collins

**Re:** Zeta Phi Beta Sorority, Inc.

**Date:** December 25, 2018

**The Scholarship Committee of Zeta Phi Beta Sorority, Epsilon Phi Zeta Chapter (Oakland-Berkeley), is attaching our organization's Scholarship Application to distribute to your students.**

**As a sorority membership of predominately African-American, college -educated women, we recognize that African-Americans are less likely to go to college, hold a college degree, and are still underrepresented on four-year university campuses. It is our belief that every high school student should have access and the opportunity to pursue a higher education, including financial assistance. Therefore, we request you distribute the scholarship information to your eligible students and encourage them to apply.**

**The applicant qualifications are listed below:**

- **Must be an African-American female**
- **Must be a current high school senior in the San Francisco Bay Area**
- **Must have at least a GPA of 3.0**
- **Must be attending a four-year institution starting Fall 2019**
- **The postmark deadline for application submission is April 6<sup>th</sup> 2019**

**Please contact me with any questions or comments at [jalizam\\_collins@yahoo.com](mailto:jalizam_collins@yahoo.com)**

**Sincerely,**

**Jaliza Collins  
Scholarship Chairperson  
Zeta Phi Beta Sorority, Epsilon Phi Zeta Chapter**

**Submit all materials to:**

**Zeta Phi Beta Sorority, Inc. \* Epsilon Phi Zeta Chapter (Oakland-Berkeley)**  
**[zetaseastbay@gmail.com](mailto:zetaseastbay@gmail.com) \* [www.facebook.com/zetaseastbay](http://www.facebook.com/zetaseastbay)**  
**[www.twitter.com/zpbepz](http://www.twitter.com/zpbepz) \* [www.zetaseastbay.org](http://www.zetaseastbay.org)**

Attn: Scholarship Committee  
P.O. Box 22805  
Oakland, CA 94609

**ZETA PHI BETA SORORITY, EPSILON PHI ZETA CHAPTER  
SCHOLARSHIP APPLICATION  
PLEASE PRINT OR TYPE**

**Student Information:**

Date \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Date of birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Home telephone \_\_\_\_\_ Student's  
cell \_\_\_\_\_

E-mail address (required): \_\_\_\_\_

**High School Information:**

Name of school now  
attending \_\_\_\_\_

School address \_\_\_\_\_  
\_\_\_\_\_

Counselor \_\_\_\_\_

**A. Academic interests**

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

**B. Extra-curricular activities:**

\_\_\_\_\_

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**C. Community service activities:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**D. Hobbies/ Special Activities/Clubs/Organizations:** \_\_\_\_\_

\_\_\_\_\_

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**E. Certificates/ Awards received in high school:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**F. First in family to attend college (Yes/No)**

**G. In which areas have you shown**

**improvement?** \_\_\_\_\_

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**College Information:**

List Colleges/ Universities to which you have applied: \_\_\_\_\_

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**Accepted** \_\_\_\_\_

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**Degree you wish to pursue** \_\_\_\_\_

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**Family Information:**

Family Yearly Gross Income: \$\_\_\_\_\_ (Gross Income should include total wages, benefits, public assistance, pensions, alimony support for dependents, etc. before deductions for taxes. (Parents of awardees may be asked to submit verification of income).

Special circumstances or comments regarding income:

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List brothers and sisters, their ages and school they attend:

**Other dependents** \_\_\_\_\_  
\_\_\_\_\_

**Mother/ Guardian name** \_\_\_\_\_ **Father/ Guardian name** \_\_\_\_\_

**Address** \_\_\_\_\_  
**Address** \_\_\_\_\_

**Telephone** \_\_\_\_\_ **Telephone** \_\_\_\_\_

**Place of employment (mother/ guardian)** \_\_\_\_\_

**Occupation** \_\_\_\_\_  
\_\_\_\_\_

**Place of employment (father/ guardian)** \_\_\_\_\_

**Occupation** \_\_\_\_\_  
\_\_\_\_\_

**Have you applied for other financial aid (scholarships, grants, etc.)? Yes \_\_\_ No \_\_\_**  
**If yes, list**

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

**Have you been awarded other financial aid? If yes, list the amount and from whom:**

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

**How did you hear about this scholarship?**  
\_\_\_\_\_

**All the following materials must be postmarked no later than  
April 6<sup>th</sup>, 2018**

**Application checklist:**

- Application**
- Two letters of recommendation (school/ community)**
- Official transcript (Must have a GPA of 3.0 or higher)**
- Photograph of yourself (photograph becomes property of Zeta Phi Beta Sorority, Inc.**

**EPZ chapter)**

- Brief essay [limit one page, single space, 12 pt. font] describing goals, needs, and desires. Express why you want to go to college/university and why you deserve a financial scholarship from Zeta Phi Beta Sorority, Inc.?**

**Submit all materials to:**

**ATTN: Scholarship Committee**

**P.O. Box 22805**

**Oakland, CA 94609**