



Alpha Beta Chapter of Tri Kappa
Scholarship Application
Postmark Deadline no later than February 1st

Applicant Name: _____ Ph: () _____

Address: _____ City: _____ Zip: _____

Date of Birth: _____

Name of High School: _____ Town: _____

Rank in High School Senior Class: _____ Number in Class: _____

Grade Point Average: _____ SAT: _____ ACT: _____

For the following attach extra pages as needed.....

Extra Curricular Activities: _____

Community Service Activities: _____

Honors and Awards Received: _____

Work Experiences: _____

Name(s) of college you plan to attend: _____

Degree and Major if known: _____

Other scholarships you have applied for: _____

Scholarships you have received and amount they pay: _____

PERSONAL

COLLEGE

Name of Parents/Guardians:

Father: _____ Mother: _____

Address: _____ Address: _____

Employment: _____ Employment: _____

Names/Ages of Siblings: _____

Number of siblings attending college next year: _____

Please make sure you send the following for your application to be considered:

- **Student Application**
- **Essay - Autobiography**
- **Official Transcript**
- **(2) Letters of reference from sources other than family with at least one from a teacher**
- **POSTMARK NO LATER than February 1st or e-mail an electronic copy to lebanonalpha@trikappa.org**

Selection committee may contact you by phone or ask for an interview to find out everything they need to know before making their decision.