

AHEPA Family Firwood District No. 22

# The Northwest AHEPA Family Educational Foundation



**2020**

## SCHOLARSHIP APPLICATION PACKET

The Northwest AHEPA Family Educational Foundation is a non-profit, IRS-approved organization interested in promoting and assisting the educational endeavors of AHEPA Family Students.

The Foundation awards scholarships to students based on academic performance, community involvement, and/or financial need. Our contribution to the educational advancement of our recipients will provide us with tomorrow's community leaders who will continue to disseminate the Hellenic heritage and culture to future generations.

*For information on eligibility, other requirements, etc., see last page of this packet.*

The fully completed **2020** application packet **MUST BE POSTMARKED BY April 30, 2020**, otherwise it will not be considered. **WARNING:** It is the responsibility of the applicant to make sure that the scholarship package has the postmark on it.

When completed, it should be mailed to: **NOTE: The below address cannot accept Certified Mail- Do Not send Certified Mail- Only regular delivery through the U. S. Postal Service will be accepted**

**NW AHEPA Family Educational Foundation  
P.O. Box 13383  
Portland, OR. 97213-0383**

## CHECKLIST FOR APPLICATION PACKET

*(All the items must be typed, except as noted.)*

**This Application Form completed and signed by the Applicant.**

**Official current transcript from present school.**

For Applicants presently attending High School, this means the transcript for grades 9, 10, 11 and the first half of grade 12. For all others, this means an official transcript for all relevant work up to last completed quarter or semester. **E- Script Transcripts will not be accepted**

**Current Letter of Recommendation.**

Provided by the Applicant's principal, counselor, teacher, professor or employer-**Must include signature and date of author.**

Applicant's Current Personal Letter.

A personal letter, either typed or hand-written, where the Applicant discusses his/her ideals, goals, and the significance of participation in school, civic, church, community, and AHEPA Family activities. If re-applying, one must provide a **new** personal letter. **Sign and date personal letter.**

**Letter of Acceptance to college or university or technical or vocational school.**

For Applicants who will be attending a different institution next year, a photocopy of the letter of acceptance from the institution.

Or check here if you will be attending the same institution.

**Completed and signed AHEPA Family Eligibility Verification Form.**

A blank form is provided at the end of this packet.

Check one:

Applicant is a Member in good standing in MOA or SOP (**Include membership number and chapter number**)

Applicant is related to Endorsing Member (parents- legal guardian) who is in good standing. (**Include membership number and endorsing chapter number: Daughters of Penelope or AHEPAN**). Upon request **Chapter President AND the Secretary must verify membership of applicant or of immediate family with proof of when dues were paid. All required signatures must be obtained (page10).**

**Applicant's Photograph.**

Include a non- returnable wallet-sized recent photo for use of the Northwest AHEPA Family Educational Foundation. By submitting a photo, the Foundation reserves the right to use the submitted photo in publications concerning the scholarship unless a specific written objection to said use is included when the photo is submitted. Applicant's photo should be size 2" x 2", "half-tone". Please write name of Applicant on back of photograph. Photographs will not be returned.

The Northwest AHEPA Family Educational Foundation

**SCHOLARSHIP APPLICATION FORM**

**A. APPLICANT'S INFORMATION**

1. Applicant's full name: \_\_\_\_\_

2. Student ID # or SSN: \_\_\_\_\_

3. Permanent Address: \_\_\_\_\_

(city, state, zip) \_\_\_\_\_

4. Telephone at that address: \_\_\_\_\_ 5. Other Tel.: \_\_\_\_\_

6. Email address (optional): \_\_\_\_\_

7. Birthplace: \_\_\_\_\_ 8. Birth Date: \_\_\_\_\_

9. Is Applicant a U.S. citizen?  Yes  No

**B. APPLICANT'S FAMILY INFORMATION**

1. Is father living?  Yes  No 2. Is mother living?  Yes  No

3. Name of father, mother, or guardian: \_\_\_\_\_

4. Address of person in 3: \_\_\_\_\_

(city, state, zip) \_\_\_\_\_

5. Telephone at that address: \_\_\_\_\_ 6. Other Tel.: \_\_\_\_\_

7. Father's occupation: \_\_\_\_\_ 7. Mother's occupation: \_\_\_\_\_

8. Names and ages of brothers and sisters:

a. \_\_\_\_\_ c. \_\_\_\_\_

b. \_\_\_\_\_ d. \_\_\_\_\_

**C. APPLICANT’S ACADEMIC STATUS**

1. Name of High School: \_\_\_\_\_

2. Address of High School: \_\_\_\_\_

(city, state, zip) \_\_\_\_\_

3. Year of graduation (past or expected): \_\_\_\_\_

4. When did you enter College, University or Technical School or expect to enter? \_\_\_\_\_

5. Are you a college graduate?     Yes     No  
If Yes, year of graduation: \_\_\_\_\_    Degree earned: \_\_\_\_\_

6. If you are presently enrolled in a College or University, what is your current status?  
 Freshman     Sophomore     Junior     Senior     Post-Graduate

7. Name of College attending (Fall): \_\_\_\_\_

8. Financial Aid Office Address: \_\_\_\_\_

\_\_\_\_\_

(city, state, zip) \_\_\_\_\_

9. Your cumulative Grade Point Average (and maximum) is: *(enter only for the one attending:)*

a. High School: \_\_\_\_\_

b. College: \_\_\_\_\_

c. Post Graduate: \_\_\_\_\_

10. What vocation or field of study do you expect to follow?  
\_\_\_\_\_  
\_\_\_\_\_

**D. APPLICANT'S SCHOOL ACTIVITIES, HONORS AND AWARDS**

1. List special recognitions, awards, honors and scholarships for excellence in academic work:

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2. List the extracurricular activities in which you participated, and any offices and positions of leadership held:

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3. List special recognition you have received for excellence in extracurricular activities:

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*(Use additional pages as needed.)*

**E. APPLICANT’S INVOLVEMENT AND ACTIVITIES WITH AHEPA FAMILY, GREEK AND CIVIC COMMUNITIES**

1. With AHEPA Family:

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2. With Greek Community:

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3. With Civic Community:

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*(Use additional pages as needed.)*





**G. APPLICANT’S EMPLOYMENT**

Include your current and past employment, in chronological order: *(Attach additional pages as needed)*

Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 \_\_\_\_\_ Hours work per week: \_\_\_\_\_  
 Dates of employment: *(from)* \_\_\_\_\_ *(to)* \_\_\_\_\_

Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 \_\_\_\_\_ Hours work per week: \_\_\_\_\_  
 Dates of employment: *(from)* \_\_\_\_\_ *(to)* \_\_\_\_\_

Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 \_\_\_\_\_ Hours work per week: \_\_\_\_\_  
 Dates of employment: *(from)* \_\_\_\_\_ *(to)* \_\_\_\_\_

Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 \_\_\_\_\_ Hours work per week: \_\_\_\_\_  
 Dates of employment: *(from)* \_\_\_\_\_ *(to)* \_\_\_\_\_

**H. APPLICANT’S CERTIFICATION**

**I hereby certify that all information on this form is true and complete to the best of my knowledge. I understand that, if requested by an official of the Educational Foundation, I agree to give proof of the information I have included in this form. I understand that failure to do so may result in my disqualification for financial aid.**

**Applicant’s signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*(You may separate this page from the rest of the application packet, if you submit it together along with your other application materials.)*

**HAVE THIS FORM COMPLETED AND SIGNED BY:  
THE PRESIDENT, VICE PRESIDENT, SECRETARY OR TREASURER OF THE ENDORSING  
CHAPTER OF AHEPA, DAUGHTERS OF PENELOPE, SONS OF PERICLES OR MAIDS OF  
ATHENA.**

**VERIFICATION OF ELIGIBILITY FORM**

By my signature below, I (name) \_\_\_\_\_ hereby certify that

I am (check one):     President         Vice President         Secretary         Treasurer

Of (check one):         AHEPA         DOP                     SOP                     MOA

Chapter No: \_\_\_\_\_ Chapter located in (City, State) \_\_\_\_\_

I also certify that (Applicant's Name) \_\_\_\_\_ is a member in good standing (membership dues paid) of the listed:

Chapter Name: MOA \_\_\_\_\_ SOP \_\_\_\_\_ (Membership # \_\_\_\_\_)

OR

his/her parent or legal guardian is. Name of parent or guardian \_\_\_\_\_,  
Membership # \_\_\_\_\_ check one AHEPAN \_\_\_\_\_) or (Daughters of Penelope \_\_\_\_\_).

Signed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

*(Signature)* \_\_\_\_\_

- For those applying who are officers in the Maids of Athena or Sons of Pericles: please have another officer in your chapter sign off on the Eligibility Form.
- Membership numbers are required on this page

- For applicants that are "Members at Large" ( not attached to a chapter)- The District 22 Governor of either the AHEPA or The Daughters of Penelope must sign this page: \_\_\_\_\_

Signature: \_\_\_\_\_

Date \_\_\_\_\_

*(Tear out this page. Do not mail it with the completed application packet.)*

## **AHEPA FAMILY FIRWOOD DISTRICT NO. 22 EDUCATIONAL FOUNDATION**

### **General Information**

AHEPA Family Firwood District 22 has created its own Educational Foundation, a Washington State IRS-approved Non-Profit Organization, and does business as Northwest Educational Foundation. Each year, AHEPA Family District 22 elects new Board Members for a 3-year term.

The Educational Foundation awards scholarships annually to members of the AHEPA Family, and to qualified members of their families.

Qualified for scholarship are those individuals who are eligible and meet other qualifications.

#### **An eligible individual is someone who:**

- (1) Has been inducted either in AHEPA, or in the Daughters of Penelope, or in the Sons of Pericles, or in the Maids of Athena in any one of the Chapters of District 22, at least **12 months** prior to the date of applying for a scholarship and must be in good standing with membership dues paid.
- (2) Is a child of, or under legal guardianship by an Endorsing Member, who is in good standing with membership dues paid as noted in paragraph (1) above.
- (3) As a "Member at Large" (qualified standing) will have to include District 22 Governor's (AHEPA or DOP) approval on the Verification and Eligibility Form.

#### **In addition, the Applicant must meet the following qualifications:**

- (1) Be presently enrolled in either High School as a senior, or in college, graduate or technical or vocational school;
- (2) Intend to attend an accredited college or university for an undergraduate or graduate program starting in the next school year, or vocational or technical school, for which the scholarship would apply;
- (3) Complete all requirements of the application process, as indicated on the application form.
- (4) The number of scholarship awards have a lifetime maximum for each applicant. Individuals are qualified to receive a maximum of two (2) undergraduate scholarships and one (1) graduate scholarship.

The Applicants must submit this application packet and related documentation by [April 30th, 2020](#).

The Educational Foundation will accept all submitted scholarship applications and keep them confidential. The scholarship applications are reviewed by volunteer independent educators. Applicants who best meet the award criteria will be considered for a scholarship.

#### **The Educational Foundation uses the following award criteria:**

- a. Academic achievement.
- b. School activities, Honors and Awards.
- c. AHEPA Family, Greek Community and other Civic Activities.
- d. Financial need, only for those who desire to be considered for additional scholarship funding and submit the required supplemental information for evaluation.

For all other questions, contact Chairperson Thomas Spathas 503-515-7203, [thomas@spathas.com](mailto:thomas@spathas.com)

All Awards are presented at the Annual District 22 Convention, which is held on June 20th, 2020.

The 2020 Scholarship Recognition Lunch will take place in Seattle, WA. If awarded a scholarship, information will be sent regarding exact location, date and time of the awards ceremony.

**Recipients are strongly encouraged to attend the Award Ceremony.**