



## IOTA PHI LAMBDA SORORITY, INC.

### FREDDA WITHERSPOON NATIONAL SCHOLASTIC SCHOLARSHIP INFORMATION SHEET

Iota Phi Lambda Sorority awards scholarships for scholastic achievement to female graduating high school seniors wishing to pursue a college degree in business related fields. The National Scholarship is held annually. Judging criteria will include academic performance/achievement, career aspirations, demonstrated leadership, and financial need. Contestants with the supervision of sponsoring chapters must mail their applications to the President Elect postmarked by January 31.

These scholarships are available through local chapters only. A chapter may submit the name of only one contestant.

1. Each chapter may select one candidate whose first occupational choice is in a business-related field.
2. Each candidate must be a female graduating high school senior.
3. The college selected by the winner must be an accredited institution.
4. **Four** \$3000 regional scholarships and **one** \$8000 national scholarship will be awarded annually. Awards are sent to the selected college or university to be applied to the recipient's tuition.
5. The scholarship recipients will be officially notified in May by the National President Elect.
6. The scholarship recipients must provide proof of enrollment before funds are allocated.
7. A chapter must use Iota's rating sheet in selecting a contestant. Chapters should consider students with excellent scholastic ability as well as those in need of financial assistance.
8. Each chapter must submit the completed **Application Packet** to the National President Elect postmarked by **January 31**.

The Application Packet **must** include the following:

- a. Student Application Form
- b. Student Rating Sheet
- c. Copy of Scholarship Contest Registration Form signed by student. ***Be certain she reads and understands what she is signing.***
- d. A current official/certified academic transcript with SAT or ACT scores
- e. Two letters of recommendations
- f. A 300-500 word autobiographical essay that includes career aspirations, leadership experiences, and significant achievements.
- g. Family income documentation (Copy of the first page of the most recent IRS 1040, please redact SS number)

Revised July 2020

**IOTA PHI LAMBDA SORORITY, INC.**  
**FREDDA WITHERSPOON NATIONAL SCHOLASTIC SCHOLARSHIP**  
**REGISTRATION FORM**

Name of Contestant \_\_\_\_\_

Last Name                      First Name                      Middle Name

Address of Contestant \_\_\_\_\_

Street                      City                      State                      Zip Code

High School Attending \_\_\_\_\_ Location \_\_\_\_\_

Sponsoring Chapter \_\_\_\_\_ Region \_\_\_\_\_

Sponsoring Chapter President \_\_\_\_\_ Telephone \_\_\_\_\_

Chapter Scholarship Chairperson \_\_\_\_\_ Telephone \_\_\_\_\_

Address of Chairperson \_\_\_\_\_

Street                      City                      State                      Zip Code

Email Address \_\_\_\_\_ Telephone \_\_\_\_\_

**PROSPECTIVE SCHOLARSHIP CANDIDATE SHOULD READ AND SIGN THE FOLLOWING:**

**I understand that:**

1. I must attend a college or university and major in a related field of business.
2. If I am a winner, all funds will be sent directly to the school of my choice to assist with my tuition after I have submitted the official document of my enrollment along with a schedule of my classes.
3. The scholarship is a one-time award.
4. Any questions I have regarding the contest may be answered by the Chapter sponsoring me.
5. I have read the above items and understand my rights.

\_\_\_\_\_  
Signature of Contestant

\_\_\_\_\_  
Date

**IOTA PHI LAMBDA SORORITY, INC.**  
**FREDDA WITHERSPOON NATIONAL SCHOLASTIC SCHOLARSHIP**  
**STUDENT APPLICATION**

Please Print

**STUDENT DATA**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
           Last                    First                    MI

Current Address \_\_\_\_\_  
   Number    Street    Apt #

\_\_\_\_\_  
           City    State    Zip Code

\_\_\_\_\_  
           Telephone #    E-Mail Address

**FAMILY PROFILE**

\_\_\_\_\_  
           Father's Name    Address    Occupation  
 Check box, if deceased

\_\_\_\_\_  
           Mother's Name    Address    Occupation  
 Check box, if deceased

\_\_\_\_\_  
           Non-Parent/ Guardian's Name    Address    Occupation  
 Check box, if deceased

Number of people in your home (including yourself) \_\_\_\_\_

Annual Household Income:  less than \$10,000  \$10,000-20,000  \$21,000-35,000  
 \$36,000-50,000  \$51,000-65,000  more than \$65,000

**ACADEMIC PROFILE**

High School \_\_\_\_\_  
   Name    City    State

Cumulative GPA include scale: \_\_\_\_\_ Class Rank \_\_\_\_\_ Total Class \_\_\_\_\_

Dates of High School Attendance: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

SAT Total Score: \_\_\_\_\_ SAT Reading: \_\_\_\_\_ SAT Math: \_\_\_\_\_ SAT Writing: \_\_\_\_\_

Date Taken: \_\_\_\_\_

ACT Score: \_\_\_\_\_ Date Taken: \_\_\_\_\_

Planned College/University: \_\_\_\_\_

Planned College Major: \_\_\_\_\_

## ACTIVITIES, HONORS, AND COMMUNITY SERVICES

List all extracurricular activities in which you have been involved (church, school, community) within the past four years. Submit documentation (clippings, letters, certificates, etc., for all activities).

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List all honors (academic and extracurricular) and other distinctions received and submit documentation (clippings, letters, certificates, etc., for all activities).

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List all community service activities in which you have been involved (food pantry, animal shelter, homeless shelter etc.) within the past four years. Submit documentation (clippings, letters, certificates, etc., for all activities).

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List your work experience (any jobs you have held) (List job, kind of work, employer, dates of employment, and hours/week).

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Who has been most influential in your school life? In what way?

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## RECOMMENDATIONS

List the name, title, address and telephone number of the **teacher, counselor, or school staff** who will submit a letter of recommendation for you. The letter should be returned to you, in a sealed envelope for inclusion with your application.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

List the name, title, address and telephone number of the **personal** reference (clergy, community leader, or employer) who will submit a letter of recommendation for you. The letter should be returned to you in a sealed envelope for inclusion with your application.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

## ESSAY

Please provide a 300-500 word double-spaced typewritten autobiographical essay. Please include your career aspirations, most significant leadership experiences, and your most significant achievements.

**The decisions of the judges are final.**

## DISCLOSURE

The information provided in this form will be disclosed only to Iota Phi Lambda Sorority as required to determine your eligibility for an award. All information will be properly disposed of according to the Record Retention /Disposition Policy of Iota Phi Lambda Sorority after award of the scholarship has been made.

I hereby certify that the information provided in this application is to the best of my knowledge, true and correct. I have not knowingly withheld any facts or circumstances that could otherwise jeopardize consideration of this application.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT/LEGAL GUARDIAN'S SIGNATURE

\_\_\_\_\_  
DATE

Revised July 2020

IOTA PHI LAMBDA SORORITY, INC.  
**Fredda Witherspoon National Scholastic Scholarship**  
 STUDENT RATING SHEET

Student's Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip Code

Sponsoring Chapter \_\_\_\_\_ Region \_\_\_\_\_

Chapter President \_\_\_\_\_ Telephone \_\_\_\_\_

Chapter Scholarship Chairperson \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Email Address \_\_\_\_\_ Telephone \_\_\_\_\_

	<b>POSSIBLE POINTS</b>	<b>POINTS</b>
Test Scores .....	120	_____
Grade Point Average .....	50	_____
*Honors and Academic Awards .....	25	_____
*Significant School Activities .....	25	_____
*Significant Community Activities .....	20	_____
*Community Volunteer Services .....	20	_____
Family Income .....	50	_____
Family Size .....	35	_____
Complete Packet Presentation.....	25	_____
Autobiographical Essay.....	80	_____
<b>TOTAL MAXIMUM POSSIBLE</b>	<b>450</b>	<b>ACTUAL TOTAL</b> _____

**EVALUATOR** \_\_\_\_\_ **DATE** \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

Packet Presentation score will - (1) include the organized appearance of the packet; (2) inclusion of ALL required items; (3) minimum of 2 recommendation letters from community leaders and school officials (4) current test scores; (5) a 1040 form with redacted social security numbers indicated.

**\*NOTE** - Include only 4 to 5 documentation sources in each category as evidence to verify all Activities, Honors, Volunteer Services and Awards. Current clippings, support letters and scanned pictures may be used as verification.