

DAUGHTERS OF PENELOPE
Paeon Chapter #253
Bethlehem

SCHOLARSHIP APPLICATION

TYPE OR PRINT ALL INFORMATION

(If additional space is required, type or print on separate sheet and attach to application.)

FULL NAME: _____
(LAST) (FIRST) (MIDDLE)

HOME ADDRESS: _____
(Street) (City)

(State) (Zip Code) (Telephone)

DATE OF BIRTH: _____

IDENTIFY THE NAME OF, AND YOUR RELATIONSHIP WITH, THE BETHLEHEM AHEPAN FAMILY.
(EX: RELATED DAUGHTER, AHEPAN, OR A LEHIGH VALLEY MAID / SON.)

NAME AND ADDRESS OF HIGH SCHOOL FROM WHICH YOU ARE ABOUT TO GRADUATE, COMPARABLE
EDUCATIONAL SCHOOL YOU ARE ATTENDING, OR COLLEGE YOU ARE ATTENDING:

LIST ANY SCHOLASTIC HONORS OR DISTINCTIONS RECEIVED IN HIGH SCHOOL AND/OR COLLEGE:

LIST EXTRA-CURRICULAR ACTIVITIES AND ANY AWARDS RECEIVED FOR SAME:

LIST COMMUNITY ACTIVITIES AND ANY SPECIAL RECOGNITION RECEIVED:

APPLICANT'S SIGNATURE

DATE

WORKING EXPERIENCE: (LIST TYPE OF JOB, EMPLOYER, AND DATES OF EMPLOYMENT):

WHEN DO YOU EXPECT TO ENTER COLLEGE?

TO WHAT COLLEGES, UNIVERSITIES, OR ACCREDITED INSTITUTIONS HAVE YOU APPLIED?
INDICATE IF YOU HAVE ALREADY BEEN ACCEPTED:

FOR WHAT PROFESSION OR OCCUPATION ARE YOU PREPARING?

ATTACH TO THIS APPLICATION YOUR ESSAY:

"WHY IS HIGHER EDUCATION AN IMPORTANT GOAL IN YOUR LIFE?"

ATTACH A COMPLETE TRANSCRIPT OF ALL HIGH SCHOOL, COMPARABLE, OR COLLEGE GRADES.
IF GRADES FOR THE CLOSING SEMESTER ARE NOT YET AVAILABLE, THESE MAY BE SENT LATER,
BUT INDICATE COURSES IN PROGRESS.

RETURN THIS APPLICATION TO THE DAUGHTERS OF PENELOPE PAEON CHAPTER #253 BETHLEHEM,
SCHOLARSHIP COMMITTEE CHAIRMAN:

Irene Chomitzky
3511 Skyline Drive
Bethlehem, PA 18020

DATE

APPLICANT'S SIGNATURE