

THETA OMICRON SCHOLARSHIP FOUNDATION, INC.

And

Omega Psi Phi Fraternity, Inc.

Rochester, New York

Scholarship Award



"We Aspire To Deliver Excellence In All We Do"

The Founders of Omega Psi Phi Fraternity, Inc. recognized the importance of the intellect in all matters pertaining to the advancement of humankind. As such, they made scholarship the foremost of the Fraternity's four Cardinal Principles: Manhood, Scholarship, Perseverance, and Uplift. Scholarship is no side issue – it is an integral and deep-rooted component of this organization. Every member, chapter, and district of the Fraternity is dedicated to scholarship. Scholarship awards are granted to outstanding High School Graduates who will be entering freshmen at an **accredited 4 year UNCF College or Historically Black College or University.** This award is granted in recognition of high achievement in scholarship, which is strongly promoted by the fraternity.

TO BE ELIGIBLE. AN APPLICANT MUST:

- Be a resident of Monroe County and a high school graduate.
- Have been accepted and plan to attend an **accredited 4 year UNCF School or Historically Black College or University.**
- Not be a candidate for graduate school.
- **Submit two letters of reference along with the application, one of which must be from your school.**
- Supply all information on the attached application form, including an autobiographical essay, and mail to:
***Theta Omicron Scholarship Foundation, Inc.
Attn: Scholarship Committee
P.O. Box 22964
Rochester, New York 14692-2964***
- Be available for interviews in person.

DUE DATE: May 16, 2025

Incomplete or late applications will not be accepted for review.

*Attach a typed essay of 300-500 words describing your autobiography, including personal aspirations and how this scholarship will enable you to meet your educational goals. Also submit a copy of your high school transcript.

Please mail this form with all attachments to:

Theta Omicron Scholarship Foundation, Inc.
Attn: Scholarship Committee
P.O. Box 22964
Rochester, NY 14692-2964

1. Name _____ Social Sec. #XXX-XX-_____
Last first middle (Last 4 Digits)

2. Address: _____ Phone No: _____
Street city zip

Email: _____

3. Date of Birth: _____ Sex: _____ Current Class Standing: _____

4. High School: _____ Graduation Date: _____

5. Extracurricular Activities: _____

6. Name and address of two people unrelated to you, willing to act as a reference:

7. List of **HBCU Colleges/Universities** to which you have applied:

Name of college Address (city, state, zip) Date Applied/Date Accepted

First Choice _____

Second Choice _____

Third Choice _____

8. Have you completed a parent's confidential statement (FAFSA)? _____

9. Number of dependent children in family _____; how many in college? _____

9a. Are you the first to attend college in your family? _____

10. Have you applied for any local or private scholarship funds? _____

10a. Have you received any other local or private scholarship approvals or commitments?

11. Budget Information for financial aid

Applicant's Parent(s)/Guardian Names: _____

Address: _____

Place(s) of Employment: _____

Adjusted Gross Income reported on Fed. Tax Form: _____

12. Estimated Budget for the School Year

INCOME

Applicants Savings: _____

Parents Contribution: _____

Summer Employment: _____

Loans & Grants Applied For

(Names & Amounts): _____

Other resources: _____

13. Applicant Signature: _____ Date: _____