

All Fields Required

Applicant Criteria:

- Must be enrolled in the 2016-2017 academic year.
- Unofficial transcript must be included for consideration.
- Must be an active member of Alpha Delta Phi.

DEADLINE: FEBRUARY 8, 2016

APPLICANT INFORMATION

Full Name: (First Middle Last)

Email Address:

UNIVERSITY EDUCATION

Major:

Minor:

Dates Attended:

Cumulative GPA:

Do you anticipate being enrolled as a full time student for the entire 2015-2016 academic year? YES NO

If not, please explain:

ELECTED EXPERIENCE

Please list all elected positions you've held within the organization.

STUDENT GROUPS

Please list all other organizations of which you're a member.

CAREER GOALS

What are your career goals for the next 10-15 years?

ESSAY

Please answer the questions below in 250 words or less. You may attach additional sheets to this form if needed.

What does being a Brother of Alpha Delta Phi mean to you?

I hereby certify that I will be a regularly enrolled student pursuing a full program of academic work that I will be an active member in my chapter during the 2016-2017 academic year; that I will use any scholarship assistance awarded to me by the Scholarship Committee only to defray direct educational expenses; and that I believe all information submitted to be true and accurate.

Signature of Applicant: _____

Date: _____

