

HIGH SCHOOL SCHOLARSHIPS

The Diamond Jubilee Pearls Foundation, Incorporated of Alpha Kappa Alpha Sorority, Incorporated – Upsilon Mu Omega Chapter was established in 1999. Its primary goal is to support educational achievement through scholarships, grants and stipends. Since its inception, the Foundation has awarded over \$100,000 to students of all ages. The Foundation is now accepting applications for its 2022-2023 scholarship program. The scholarships described below provide financial assistance to graduating, high school seniors planning to attend an accredited college, university, or trade school as a full or part-time student. A student may apply for both of the scholarships listed below, but will only receive one scholarship, if awarded. Each scholarship will be a minimum of \$1,000 dollars.

Completed application package can be submitted via e-mail to:

umodjpscholars@gmail.com

(subject should be "High School Scholarship Application – LASTNAME")

Completed application package can be submitted via mail to:

Upsilon Mu Omega Chapter Alpha Kappa Alpha Sorority, Incorporated P.O. Box 250645 Milwaukee, WI 53225.

Deadline

E-mailed applications must be received by **May 6th**, **2022**. Mailed applications must be **postmarked by May 6th**, **2022**. Late or incomplete packages will *not* be reviewed.

ACADEMIC SCHOLARSHIP



Eligibility Criteria:							
 ☐ High School Senior (Anticipated Graduation in 2022) ☐ African-American ☐ City of Milwaukee resident ☐ 3.0 or higher cumulative grade point average on a 4.0 scale 							
A complete application package for the Academic Scholarship includes:							
 Completed scholarship application Current official transcript (with institution's official seal or Registrar's signature) A one (1) page typed essay describing your career goals and aspirations and the importance of educational achievement. Formatting Requirements: 12-point font, 1" margins, Single spaced. Three (3) letters of recommendation (excluding relatives). One letter must be from a Professor or Academic Advisor. Please use the enclosed recommendation form. A separate letter must be submitted along with the form. All recommendations (forms and letters) must be signed. 							
THE DR. DOROTHY BUCKHANAN WILSON HISTORICALLY BLACK COLLEGE AND UNIVERSITY							
(HBCU) SCHOLARSHIP							
Eligibility Criteria:							
 ☐ High School Senior (Anticipated Graduation in 2022) ☐ African-American/Black ☐ City of Milwaukee resident ☐ 3.0 or higher cumulative grade point average on a 4.0 scale ☐ Plan to attend an Historically Black College or University 							
A complete application package for the HBCU Scholarship includes:							
 Completed scholarship application Current official transcript (with institution's official seal or Registrar's signature) A one (1) page typed essay describing your career goals and aspirations and the importance of educational achievement. Formatting Requirements: 12-point font, 1" margins, Single spaced. Three (3) letters of recommendation (excluding relatives). One letter must be from a Professor or Academic Advisor. Please use the enclosed recommendation form. A separate letter must be 							

submitted along with the form. All recommendations (forms and letters) must be signed.

FIRST GENERATION COLLEGE STUDENT SCHOLARSHIP

Eligibility Criteria:



- High School Senior (Anticipated Graduation in 2022)
- Undergraduate student (currently enrolled in an accredited college, university, technical, or trade school)
- o African American/Black
- o City of Milwaukee resident
- o 2.5 grade point average on a 4.0 scale

A complete application package for the Academic Scholarship includes:

- o Completed scholarship application
- o Current **official transcript** (with the institution's seal)
- A one (1) page typed essay, describing your career goals and aspirations for successfully completing college as the first person in your family. Formatting Requirements: 12-point font size, 1" margins, single spaced.
- Three (3) letters of recommendation (excluding relatives). One letter
 must be from a professor or an academic advisor. Please use the
 enclosed recommendation form. A separate letter must be submitted
 along with recommendation form. All forms and letters must be
 signed.

HIGH SCHOOL SCHOLARSHIP APPLICATION



Name:	Emai	l:	
Address:	City:	State:	Zip:
Home Telephone:_()_	(Cell Phone:_()_	
Parent/Guardian Name (if ap	oplicable):		
Scholarship for which you ar	e applying (Please chec	k one only):	
Academic: Dr. Dorot Student	thy Buckhanan Wilson H	BCU: First Gene	ration College
Name of High School:			GPA:/4.0
Name of High School Counse	lor:		
College or University you are	planning to attend:		
Extracurricular activities:	Av	vards and special Recog	gnition:
Community involvement:			
References (Provide three refe	-	En	nail
Name	Telephone	EII	1811
1.			
2.			
3.			
(Sim			(Date)

HIGH SCHOOL SCHOLARSHIP RECOMMENDATION FORM



The Diamond Jubilee Pearls Foundation, Incorporated of Alpha Kappa Alpha Sorority, Incorporated – Upsilon Mu Omega Chapter was established in 1999. Its primary goal is to support educational achievement through scholarships, grants and stipends. Since its inception, the Foundation has awarded over \$100,000 to students of all ages. The Foundation is now accepting applications for its 2022-2023 scholarship program.

Please complete the following recommendation form on behalf of the student who requested it. A separate letter of recommendation may be submitted *with* the completed form.

Completed Recommendation form can be submitted via e-mail to:

umodipscholars@gmail.com

(subject should be "High School Scholarship Application – Recommendation Form")

Completed Recommendation form can be submitted via mail to:

Upsilon Mu Omega Chapter Alpha Kappa Alpha Sorority, Incorporated P.O. Box 250645 Milwaukee, WI 53225.

Deadline

E-mailed forms must be received by **May 6th**, **2022**. Mailed forms must be **postmarked by May 6th**, **2022**. Late or incomplete packages will *not* be reviewed.

Recommendation Form

Name of App Date:							No.
Your assessment application. Plot for each charac	nt of the ap ease rate th	-	-		•	king the appro	priate rating
AREA	Below Average	Average	Good (above average)	Very Good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	Top Few (top 1%)
Diligence							
Academic Achievement							
Interpersonal Relations							
Maturity							
Motivation							
Leadership							
Concern for Others							
Initiative							
Overall Assessment							
How long have y							
In what capacity	y have you F	known this a	applicant?				
Additional Com	ments:						
Name				Phone			
Organization_				Email			
Position/Title_							

(Signature)

(Date)

Recommendation Form

Name of App	olicant: _						
Date: Your assessme	nt of the an	 nlicant wil	l heln us in o	ur evaluation o	of his/her	William .	
application. Ple	-	-	-		•	·king	Common
the appropriate	e rating for	each chara	cteristic:		-		
AREA	Below Average	Average	Good (above average)	Very Good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	Top Few (top 1%)
Diligence							
Academic Achievement Interpersonal							
Relations							
Maturity							
Motivation							
Leadership							
Concern for Others							
Initiative							
Overall Assessment							
How long have y	ou known	this applica	nt?	years and	l	months.	
In what capacity	have you l	known this	applicant?				
Additional Com	ments:						
Name				Phone			
Organization_				Email			
Position/Title_							

(Date)

(Signature)

Recommendation Form

Name of App Date:	olicant: _						
Your assessment application. Pla for each charac	ease rate th					king the appro	priate rating
AREA	Below Average	Average	Good (above average)	Very Good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	Top Few (top 1%)
Diligence							
Academic Achievement Interpersonal							
Relations							
Maturity							
Motivation							
Leadership							
Concern for Others							
Initiative							
Overall Assessment							
How long have y	ou known	this applica	nt?	years and	l	months.	
In what capacity	have you l	known this	applicant?				
Additional Com	ments:						
NameOrganization_							
Position/Title_							
1 05161011/ 11616_							

(Date)

(Signature)