



**The Chi Omega Alumnae Association of Houston, Inc.
 Chi Omega Kaleidoscope
 Chi Omega Mothers' Club of Houston
 Combined Scholarship Application 2018**

Application is **DUE NO LATER than Wednesday, February 14, 2018**. No late or incomplete applications will be considered or accepted. All documents (except the Chapter Advisor Board Questionnaire) must be submitted together electronically.

Multiple emails of application information will not be accepted.

Please type or print clearly and completely.

Eligibility requirements for all Chi Omega Alumnae of Houston, Inc. and Kaleidoscope scholarship recipients:

- Must be an initiated and an active chapter member in good standing in the semester that the award is announced.
- All required documents must be included in one electronically submitted completed application package.
- Must have a minimum **CUMULATIVE** GPA of 3.0 or higher on a 4.0 grade scale, be a full time student and have completed a minimum of 30 college credit hours.
- Must have graduated from a high school in the Greater Houston or surrounding areas **AND**:
 - Have their mother listed as a current dues paying member of the Chi Omega Mothers' Club of Houston on or before **January 31st** of the same year of application (for non legacy members).
 - Have their mother as current dues paying members of both Chi Omega Alumnae Association of Houston and the Chi Omega Mothers' Club of Houston on or before **January 31st** of the same year of application (for legacy members).

Eligibility requirements for all Chi Omega Mother's Club of Houston Dues scholarship recipients:

- Must be an initiated and an active chapter member in good standing in the semester that the award is announced.
- All required documents must be included in one electronically submitted completed application package.
- Must have a minimum **CUMULATIVE** GPA of 3.0 or higher on a 4.0 grade scale, be a full time student and have completed a minimum of 30 college credit hours.
- Must have graduated from a high school in the Greater Houston or surrounding areas **AND** their mother must be a dues paying member of the Chi Omega Mother's Club of Houston.

PLEASE CHECK EACH SCHOLARSHIP YOU ARE APPLYING FOR:

- CHI OMEGA ALUMNAE ASSOCIATION (DUES ONLY)
- CHI OMEGA MOTHER'S CLUB OF HOUSTON (DUES ONLY)
- CHI OMEGA KALEIDOSCOPE SCHOLARSHIPS (TUITION ONLY)

PERSONAL INFORMATION

FULL NAME: _____ EMAIL ADDRESS: _____

CELL PHONE: _____ HIGH SCHOOL & GRADUATION YR: _____

HOME ADDRESS: _____

COLLEGE ADDRESS: _____

MOTHER'S FULL NAME (INCLUDE MAIDEN NAME): _____

EMAIL ADDRESS: _____ CELL#: _____

IS YOUR MOTHER OR GRANDMOTHER A CHI OMEGA? (Y/N) _____ IF YES, PLEASE LIST THE UNIVERSITY, CHAPTER AND INITIATION DATE: _____

COLLEGIATE INFORMATION

UNIVERSITY: _____ STUDENT ID#: _____ TOTAL HOURS: _____ CLASSIFICATION: _____

UNIVERSITY REGISTRAR'S ADDRESS: _____

BILL HIGHWAY (BH) ACCOUNT #: _____ EMAIL ADDRESS ASSOCIATED WITH BH ACCT: _____

MAJOR/MINOR: _____ CUMULATIVE GPA: _____ MAJOR GPA: _____

CHAPTER MEMBER SIZE (PLEASE CHECK): UP TO 99; 100-199; 200-299; 300-399; 400+

PLEASE LIST ALL CHI OMEGA ACTIVITIES/COMMITTEES YOU HAVE BEEN INVOLVED IN AS AN ACTIVE MEMBER? PLEASE ALSO LIST THE NUMBER OF HOURS YOU SPEND ON THE CHI OMEGA ACTIVITY YOU ARE INVOLVED IN? (EX. CARDINAL CABINET 2016-15 HOURS/WK.) _____

HOW MANY HOURS PER WEEK DO YOU SPEND ON ACTIVITIES OTHER THAN CHI OMEGA? PLEASE LIST THE ACTIVITY AND NUMBER OF HOURS YOU SPEND ON THE ACTIVITY OUTSIDE OF CHI OMEGA? (EX. STUDENT GOV'T CLASS DELEGATE 2015-10 HOURS/WK) _____

FINANCIAL AID/OTHER FINANCIAL INFORMATION

IF YOU HAVE OTHER SCHOLARSHIPS/GRANTS/LOANS AT THIS TIME, PLEASE ATTACH A SEPARATE SHEET DETAILING THE AMOUNT, FROM WHOM YOU ARE RECEIVING SCHOLARSHIPS/GRANTS/LOANS, AND THE DURATION OF EACH.

ARE YOU CURRENTLY EMPLOYED WHILE ATTENDING SCHOOL? (Y/N) _____

IF YES, WHERE: _____ POSITION: _____ # HOURS/WEEK _____

ARE YOU EMPLOYED DURING THE SUMMER/SCHOOL BREAKS? (Y/N) _____

IF YES, WHERE: _____ POSITION: _____ # HOURS/WEEK _____

WHAT ARE YOUR TOTAL COLLEGE EXPENSES/SEMESTER? _____

HOW MUCH OF THESE TOTAL EXPENSES/SEMESTER ARE YOU PERSONALLY (NOT YOUR PARENTS) RESPONSIBLE FOR: _____

Please include all of the following items in a **SINGLE** application email transmission to be considered for scholarship funds:

- _____ Completed combined scholarship application.
- _____ Most current college resume listing all of your accolades and college activities.
- _____ Copy of current transcripts.
- _____ Separate photo of applicant. (We will post photos of all scholarship recipients in our Alumnae/Mothers' Club newsletter.)
- _____ Essay of 250 words or less describing your career plan for the future and how your Chi Omega experience has enhanced your collegiate career.
- _____ Financial Aid/Other Scholarship information – if applicable.
- _____ Chapter Advisory Board Member Questionnaire must also be filled out. (This form is attached to this application and must be handed to the advisor by the applicant) *

***The Chapter Advisory Board Questionnaire Form 2017 needs to be completely filled out and sent electronically to the Scholarship Chairperson by the advisor ONLY on or before the application deadline.))**

Please Note - The scholarship will be revoked should any of the following occur:

- The recipient transfers to another school within 1 year of the scholarships being awarded. (Since there is a break in active chapter membership for one semester, the scholarship will be revoked.)
- The recipient should leave school entirely for any reason within 1 year of the scholarship being awarded.
- The recipient's good standing status changes at any time within 1 year of the scholarship being awarded.

I, the undersigned, understand the requirements for scholarship qualification for the Chi Omega Alumnae Association of Houston, Chi Omega Kaleidoscope and/or Chi Omega Mothers' Club of Houston. By my signature below, I am also giving my permission to use my photo and likeness in any and all Chi Omega Executive Headquarters, Chi Omega Alumnae Association of Houston, Chi Omega Kaleidoscope and Chi Omega Mothers Club publications and websites as it relates to these scholarship opportunities. I also confirm, by my signature below, that all of my information is true and accurate.

Signature of Applicant

Date

**Submit completed application packets via email on or before Wednesday, February 15, 2017 to
Carey D. Dow, Chi Omega Alumnae Association of Houston Scholarship Chairperson at 713-822-3981
SCHOLARSHIP@CHIOMEGAHOUSTON.COM
NO LATE OR INCOMPLETE PACKETS WILL BE ACCEPTED**

Chapter Advisor Board Recommendation Questionnaire Form 2018

Advisors—please submit this form on or before Wednesday, February 14, 2018 to

Carey D. Dow, Scholarship Chairperson

713-822-3981

scholarship@chiomegahouston.com

CHAPTER ADVISORY BOARD MEMBER INFORMATION

FULL NAME OF CHAPTER ADVISOR (PLEASE INCLUDE MAIDEN NAME): _____

WHAT CHAPTER ADVISORY BOARD POSITION DO YOU HOLD? _____

YOUR INITIATED CHAPTER NAME: _____ DATE OF INITIATION: _____

SIGNATURE OF ADVISOR: _____

APPLICANT'S CHAPTER INFORMATION

APPLICANT NAME: _____

CHAPTER NAME: _____ UNIVERSITY NAME: _____

APPROXIMATE CHAPTER SIZE: _____ 0-99 _____ 100-199 _____ 200-299 _____ 300-399 _____ 400+

CHAPTER FEES/SEMESTER: _____ HOUSING FEES/SEMESTER (INCLUDE MEAL FEES AND OTHER MISC FEES) _____

ACTIVE CHAPTER MEMBER INFORMATION

FULL NAME OF ACTIVE CHAPTER MEMBER: _____

PLEASE LIST THE CHAPTER EXECUTIVE OFFICES AND CARDINAL CABINET CHAIRPERSON POSITIONS THAT THIS MEMBER HAS SERVED (EX. GH—2015-2016): _____

PLEASE LIST THE CARDINAL CABINET COMMITTEE POSITIONS THAT THIS MEMBER HAS SERVED (EX. SISTERHOOD COMMITTEE-2014-2015): _____

HOW IS THE MEMBER'S ATTENDANCE AND PARTICIPATION AT CHI OMEGA CHAPTER EVENTS SUCH AS RECRUITMENT WORKSHOPS, OTHER GREEK EVENTS? PLEASE EXPLAIN: _____

HAS THIS MEMBER ATTENDED EVERY CHAPTER MEETING? (Y/N) _____ IF SHE HAS MISSED ANY MEETINGS, PLEASE LET US KNOW HOW MANY SHE HAS MISSED IN A YEAR: ___1-2 ___3-4 ___5+.

ARE THERE ANY SPECIAL CIRCUMSTANCES THAT OCCURRED FOR THE MEMBER TO NOT REGULARLY ATTEND CHAPTER MEETINGS? IF SO, PLEASE EXPLAIN: _____

HOW DOES THIS MEMBER SPECIFICALLY UPHOLD OUR PILLARS AND SYMPHONY TO NOT ONLY HER FELLOW ACTIVE MEMBERS BUT ALSO THE UNIVERSITY AT LARGE? _____

ANY SPECIAL CIRCUMSTANCES ABOUT THIS MEMBER THAT YOU FEEL WE WOULD NEED TO KNOW? IF SO, PLEASE LIST AND EXPLAIN: _____

