



**American Hellenic Educational Progressive Association
Milwaukee Chapter #43 ★ AHEPA Scholarship Foundation**

Student Scholarship Application

Application Deadline – Friday, March 4th, 2022

Personal Interview – Sunday, March 20th, 2022

Awards Presentation – Sunday, May 1st, 2022 *

** Subject to local and state regulations concerning health safety.*

Mission Statement of the AHEPA Chapter 43 Scholarship Program

The *Milwaukee AHEPA Chapter #43 Scholarship* program recognizes academically gifted high school students and rewards those in our Hellenic community who have achieved outstanding success. We acknowledge and place high value on the well-rounded student and their potential for future success. Our program is a source of encouragement to the student planning on attending university or college, helping him or her appreciate our Hellenic heritage, and provide for our community an ever-expanding source of support for the future of AHEPA.

Please send the completed application, forms and correspondence to:

APPLY BY POSTAL MAIL

AHEPA Scholarship Foundation
c/o Dr. Peter Gaveras
1244 North 86th Street
Wauwatosa, WI 53226

LATE APPLICATIONS WILL NOT BE ACCEPTED.

All questions should be directed to Dr. Gaveras at 414-795-7100 or scholarships@ahepa43.org.

This is the application for *AHEPA Milwaukee Chapter #43 Scholarship*. Provided you meet the requirements on page 2, this scholarship is for graduating high school seniors who plan on attending a university or college in fall of 2022. If you are interested in the *AHEPA District #13* scholarship or other Hellenic scholarships, please refer to our *Chapter's* website (<https://www.ahepa43.org>) for those applications.

AHEPA Milwaukee Chapter #43 ★ AHEPA Scholarship Foundation

SCHOLARSHIP APPLICATION

Eligibility Requirements for Academic Scholarship:

In order to be eligible for an AHEPA Milwaukee Chapter #43 scholarship, an applicant **MUST** meet **BOTH** of the following criteria:

- A senior high school student eligible for graduation at the end of the 2020-2021 school year; and
- A minimum cumulative GPA of 3.0 on a 4.0 scale.

In order to be eligible for an AHEPA Milwaukee Chapter #43 scholarship, an applicant **MUST** meet **ONE** of the following criteria:

- A child or grandchild of a member of Milwaukee AHEPA Chapter #43 or Daughters of Penelope Hector 103. (If the grandchild does not reside in the six-county area — *Milwaukee, Ozaukee, Racine, Sheboygan, Washington, and Waukesha Counties* — their father must be an AHEPAN and/or mother a DOP of a different chapter.)
- Be of Hellenic descent and reside in the six-county area.

Application Requirements:

- Include a certified transcript of grades from the applicant's high school. The official correspondence must include class rank;
- A certified copy of either the ACT or SAT test results (*not required if noted on official transcript*);
- A letter of recommendation from an educator at the applicant's high school (*submitted separately, by the educator*);
- Athletic award applicants must also submit a letter of recommendation from a high school coach;
- A recent photograph of the applicant, no larger than 2 ½ x 3 ½, which becomes the property of the Scholarship Foundation;
- Applications must be submitted on time, received by the deadline, **Friday, March 4th, 2022. LATE APPLICATIONS WILL NOT BE ACCEPTED.**
- A **two-paragraph biography** (*only two paragraphs, please*) that includes the applicant's high school, intended major, intended university or technical college, a few accomplishments, and a sentence or two from a letter of recommendation. The biography is required for the Event Program and is not used for scholarship evaluation purposes. **Please email your biography to scholarships@ahempa43.org.**
- Qualified applicants will be required to participate in a personal interview on **Sunday, March 20th, 2022.**

Please indicate the scholarship(s) for which the applicant is applying:

AHEPA Scholastic Award *Athletic Award*

Personal Information

NAME	DATE
ADDRESS	
CITY, STATE ZIP	
MOBILE PHONE	OTHER PHONE
EMAIL	
BIRTHPLACE	DATE OF BIRTH

Educational Information

HIGH SCHOOL ATTENDING	
ADDRESS	
CITY, STATE ZIP	
PHONE	DATE OF GRADUATION
COLLEGE/UNIVERSITY PLANNING TO ATTEND	
EDUCATIONAL OBJECTIVES	
CAREER YOU PLAN TO PURSUE	

Family Information

	FATHER	MOTHER
NAME		
ADDRESS		
CITY, STATE ZIP		
BIRTHPLACE		
EMPLOYER		
OCCUPATION		

APPLICANT'S SIBLINGS		
NAME	AGE	SCHOLARSHIP YEAR

Please note if the applicant's siblings previously received an AHEPA Scholarship.

Is the applicant or the applicant's parent(s) or grandparent(s) currently a member of *AHEPA* or the *Daughters of Penelope*? Yes No

If yes, please indicate which membership affiliation exists :

AHEPA: Father Grandfather
Daughters of Penelope: Mother Grandmother

Name & Relationship of *AHEPA* or *DOP* Member:

If the lodge is different than *AHEPA Chapter #43* and *Daughters of Penelope Hector #103*, please indicate :

If you answered NO to the above AND you are of Greek descent, please describe in sufficient detail your Greek background and your current involvement in activities within the Greek community :

Please list any extracurricular involvement that you may have had in each of the following areas. Please include membership in organizations, offices held, honors and awards received, activities and hobbies, and any work experiences as well. Please attach a separate page if needed. The committee will notify the applicants in writing as to the status of the award.

Church Related Activities & Involvement (<i>Greek Orthodox Church Youth Activities, or if not attending a Greek Orthodox Church, one's involvement in his or her own church, and any Hellenic involvement.</i>)	
School Activities & Involvement	
Civic Community Activities	
Leadership Qualities and Accomplishments	
Varsity High School Participation & Awards (<i>if applying for an athletic award</i>)	
Other Information (<i>Include any other information which you feel may be of value to the Scholarship Section Committee. If there is a financial need or special circumstances that you feel are important for the committee to be aware of, please indicate below or attach a separate note and the chairman will contact you.</i>)	
APPLICANT SIGNATURE	DATE