

# 2025 Application & Instruction Information Sheet Post-Secondary Education Applicants

Daughters of Penelope- Elis Chapter 89, Reno, Nevada

**Deadline: May 15, 2025** 

The Daughters of Penelope, Elis Chapter 89 Scholarship (DOP 89) is awarded each year for post-secondary education; and is awarded to college, graduate, or trade school students.

## (A) ELIGIBILITY REQUIREMENTS:

- 1. A parent, grandparent, or legal guardian who is a member in good standing of the AHEPA-Daughters of Penelope (DOP) family may sponsor the applicant. This includes deceased lifetime members who were actively involved at the time of their passing.
- 2. The applicant must be a child or grandchild of the sponsor.
- 3. To be in good standing, the sponsor will have paid their dues for the two years (prior and current year) and attended at least 4 meetings in the current year (by the application deadline), as verified by the Chapter Secretary or Treasurer upon sponsoring the applicant. Candidates who were members of another AHEPA or Daughters of Penelope chapter and who have joined the Reno chapter will be considered under the same criteria.
- 4. To receive funds, the applicant must provide evidence of active attendance or enrollment in a university, community college, or trade school.
- 5. Application must be completed as per the instructions.

# (B) CRITERIA USED FOR JUDGING THE APPLICANTS

Each correctly completed scholarship application is eligible based on the criteria below:

- 1. Academic achievement
- 2. Leadership and service in the community, school, or church
- 3. Strength of essay

#### (C) INSTRUCTIONS TO APPLICANTS:

Complete and mail the completed application package.
 Mail to the Scholarship Chairperson POSTMARKED no later than the above due date. Please send the completed application to the address below. Mailing by certified mail is recommended for your own records.

### Mail to:

DOP 89 Scholarship Committee P.O. Box 21533 Reno, NV 89515

2. ALL RESPONSES ON THE APPLICATION FORM MUST BE PRINTED IN INK OR TYPED ON THE ORIGINAL FORM PROVIDED. Please do not alter the form.

- 3. Application Submittal Checklist:
  - SCHOLARSHIP APPLICATION FORM-Fully Completed
  - MOST RECENT OFFICIAL SCHOOL TRANSCRIPT in a <u>SEALED</u> envelope (2.0 and above required)
  - 2 WRITTEN LETTERS OF RECOMMENDATION -- ONE FROM EACH CATEGORY BELOW:
    - FROM TEACHER, ADMINISTRATOR OR EMPLOYER
    - FROM A COMMUNITY MEMBER i.e. organizations, volunteer work, workplace, etc.

Note: Letters must be HAND SIGNED and in a <u>SEALED</u> envelope.

EMAILS AND PREVIOUSLY SUBMITTED LETTERS OF RECOMMENDATION WILL NOT BE ACCEPTED.

#### **DISBURSEMENT OF FUNDS**

It is the responsibility of the award recipient to provide the Scholarship Committee with written evidence of a minimum of 6 units or part-time enrollment in advance of the **due date for tuition payment**.

FAILURE TO PROVIDE PROOF OF ENROLLMENT BY THAT DATE WILL RESULT IN FORFEITURE OF THE AWARD. THE RECIPIENT'S LOSS OF ELIGIBILITY PRIOR TO DISBURSEMENT OF THE AWARD WILL ALSO RESULT IN FORFEITURE OF THE AWARD.

Each award will be disbursed when registration is due for the school year and will be awarded only for the current academic school year. The award cannot be deferred. The funds will be disbursed directly to the institution of higher education that the recipient plans to attend.

#### **FINAL DECISION**

Only the recipient will be notified by August 15, 2025.

The Scholarship Committee reserves the right to make the final decision on the award recipient as per the DOP 89 Scholarship Guidelines.

# 2025 Scholarship Application Form for Post-Secondary School Students Applicant's Name:

	Telephone:
Address:	City State Zip Code
Fill in the <b>Sponsor's name</b> (parent, grand	ndparent, or guardian) who is a member of the Daughters of Penelope or AHEPA
Sponsor Name:	Relationship:
Contact:	(Phone # and/or Email) y, and in what subject area?
vnat is your planned major field of study	r, and in what subject area?
Vhat institution will you be attending?	
Vhat degree, diploma, or certificate do yo	rou plan to obtain? (i.e. AA, A, BS)
Start Date of Classes?	obs you may have had during the past two years. ition. If more than two, provide the same details on a separate sheet.
Employer:	Job Description:
Supervisor:	
Telephone No:	
Job Title:	
Hrs. Worked per Week	
Dates of Employment	
Employer:	Job Description:
Supervisor:	
Employer:  Supervisor:  Job Title:  Hrs. Worked per Week	
Supervisor: Job Title:	

List any honors and awards you have achieved post-high school.				
<b>(School activitie</b> Explain your involvement.	es, community service, chur	ılar activities post high ch, volunteering to incl	school ude DOP/AHEPA events, etc.).	
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<sup>4 |</sup> Page DOP Elis 89 – Reno NV – Post Secondary School Students Scholarship Application and Information Revised 03/30/2025

Write only a <b>one-page</b> essay on the following topic:				
Reflect on a transformative experience that shaped your character, values, and personal growth.				
Sign and Date this application:				
Signature	Date			