



SCHOLARSHIP APPLICATION

Petals of Hope Foundation, Inc. is comprised of the members of the Orlando Chapter of Alpha Kappa Alpha Sorority, Inc. Alpha Kappa Alpha Sorority, Inc. founded in 1908, is the oldest African American sorority in the U.S.A.

Please check one: I am attending a _____ Historically Black College or University (HBCU) _____ Other College/University

Personal Data

Name _____ Email Address _____

Date of Birth _____ Cell Phone Number (____) _____

Current Residence _____
Street City Zip

Name(s) of Parent(s) or Guardian _____

Parent/ Guardian Contact Number (____) _____ Parent/Guardian Email Address _____

Educational Data

School Presently Attending _____

School Address _____
Street City Zip

Grade Point Average (Grade 9 through First Semester of the Senior Year) _____
Un-Weighted

College or University Which You Plan to Attend _____

Address _____
Street City/State Zip

Student Activity Information

Directions: Please complete each section. **DO NOT BE MODEST.** All information can be used by the Scholarship Committee during the selection process.

Extra-Curricular Activity	Description	Leadership Position Held	Length of Service

Community Activities

Directions: List community activities in which you have participated (Church groups, volunteer organizations, clubs, community art endeavors, etc.). The activities in which you engage must be completed outside of school.

Community Service Activity	Description	Length of Service

Work Experience

Place of Employment	Description of Responsibilities	Dates

Recognition & Awards

Directions: List any honors, awards, and/or recognitions that you have received (Grades 9 - 12).

Award/Recognition	Grade(s)

References

Directions: **Two completed recommendations forms** are required. One must come from your high school teacher or college professor, and one must come from a community member (church member, employer, volunteer supervisor, or youth civic leader).

Application and requested documents must be received by Friday, March 6, 2026 (postmark date not accepted). The application, official transcript, and the two (2) completed recommendation forms must be submitted in one envelope and mailed, first class U.S. mail (please no certified mail return receipt request). Information received after Friday, March 6, 2026 will disqualify the applicant.

Application Checklist:

- ___ official transcript (hard copy)
- ___ selected application type: HBCU **or** other college/university
- ___ wrote 300-word formal essay (typed; 12-Font)
- ___ included scholarship application
- ___ submitted two completed recommendation forms