



Alpha Kappa Alpha Sorority, Inc.®  
Alpha Alpha Mu Omega Chapter  
P.O. Box 369  
Georgetown, DE 19947

## Collick Community Book Scholarship Application

The Alpha Kappa Alpha Sorority, Inc.® – Alpha Alpha Mu Omega Chapter **Collick Community Book Scholarship** was established with the purpose to provide financial assistance to a Sussex County, Delaware high school senior as they pursue their undergraduate education at either a 2-year or 4-year accredited college or university or technical college. This scholarship is named in honor of Ms. Stephanie Collick, whose commitment to service was instrumental in the establishment of the Alpha Alpha Mu Omega Chapter and served as the first vice-president of the chapter. The **Collick Community Book Scholarship** in the amount of **\$500.00** will be awarded to the recipient who demonstrates an exceptional commitment to service within the communities they serve. This scholarship is based upon academic achievement, aptitude, leadership, and character.

### Qualifications

1. Applicant must be a Senior in high school with an anticipated graduation date of **May/June of the current academic year.**
2. Applicant must be a **Sussex County, Delaware Resident** (Copy of ID required)
3. Applicant must have at least **2.75 GPA on a 4.0 scale.**
4. Applicant must be attending an either a **2-year or 4-year institution or technical college** after high school graduation.
5. Applicant must submit 2 signed **letters of recommendation** from counselor, teacher, coach, community official, pastor, group leader, etc. on official letterhead that supports the applicant's community involvement.

**Completed Applications are due **March 15<sup>th</sup>****

### Mail:

Alpha Kappa Alpha Sorority, Inc.®  
Alpha Alpha Mu Omega Chapter  
P.O. Box 369

Georgetown, DE 19947

(Applications should be postmarked by March 15<sup>th</sup>)

### Email:

[scholarships@georgetownaka.com](mailto:scholarships@georgetownaka.com)

*(Please include the Name of Scholarship and Applicant Name in the subject line)*

### Complete Online:

<https://form.jotform.com/230197443944158>



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## Collick Community Book Scholarship Application

### Student Information

<b>Student Name:</b>		<b>Student Date of Birth:</b>	
<b>Address:</b>			
<b>City</b>		<b>State</b>	<b>Zip</b>
<b>Email Address:</b>		<b>Student Phone Number:</b>	
<b>Current High School:</b>	<b>Anticipated Graduation Date:</b>	<b>Current GPA:</b>	
<b>Anticipated College or University:</b>		<b>Anticipated Major:</b>	

**Optional: \*\*\* FOR INFORMATIONAL PURPOSES ONLY\*\*\***

Age	Gender	Ethnicity	Estimated Annual Household Income:
<input type="radio"/> Under 17 years <input type="radio"/> 18-19 years <input type="radio"/> 19-20 years <input type="radio"/> Over 20 years	<input type="radio"/> Female <input type="radio"/> Male <input type="radio"/> Non-Binary <input type="radio"/> Prefer Not to Say	<input type="radio"/> White or Caucasian <input type="radio"/> Black or African American. <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Native Hawaiian or Other Pacific Islander	<input type="radio"/> Under \$20,000 <input type="radio"/> \$20,000-40,000 <input type="radio"/> \$40,000- \$60,000 <input type="radio"/> \$60,000-\$80,000 <input type="radio"/> \$80,000- \$100,000 <input type="radio"/> Above \$100,000

\_\_\_\_\_  
 Applicant Signature Date

If applicant is under 18 years of age:

\_\_\_\_\_  
 Parent/Guardian Name    Parent/Guardian Signature    Date

\_\_\_\_\_  
 Parent/Guardian Email    Parent/Guardian Phone Number



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**Collick Community Book Scholarship Application**

**Community Service Experience**

List Community Service Experience during High School, please include number of hours

9 <sup>th</sup> Grade	10 <sup>th</sup> Grade	11 <sup>th</sup> Grade	12 <sup>th</sup> Grade



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**Collick Community Book Scholarship Application  
Application Check List**

- Completed Application
- 2 signed letters of recommendation on letterhead
- Unofficial High School transcript
- Letter of College Acceptance/Signed Letter of Intent
- Signed Alpha Alpha Mu Omega Chapter Media Release form

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