# ALPHA DELTA EPSILON CHARITABLE FOUNDATION

## Scholarship Application Academic Year 2021-2022

Instructions:  Please fill out all information requested on this form.  Once you have completed the form, attach a current copy of your high school and college (if applicable) transcripts to the application.   Please scan all documents and email to: ADERUscholarship@gmail.com.  **DEADLINE IS June 1, 2021**

It is the preference of the scholarship committee to award scholarships to family relations of members of the Rutgers University chapters of the Alpha Delta Epsilon and/ or Alpha Gamma Rho fraternities.  It is also the preference of the scholarship committee to award scholarships to eligible family members who are enrolling in an institute of higher education, particularly students enrolled/enrolling at Rutgers University. However, this scholarship may be awarded for any academic need and is not limited solely to college scholarships.   The scholarship committee will evaluate each application based on its individual merits, which may include the preferences above.

It is anticipated that the total award for the academic year 2021-2022 will be $25,000, but the actual amount distributed may be lowered at the discretion of the scholarship committee.

Scholarship recipients are required to provide proof of satisfactory completion of their course of study for this academic year within 30 days after the completion of their academic year.  The form of this verification will vary depending on the nature of the course of study.  For courses of study for which grades are awarded, a copy of the scholarship recipient's transcript must be provided.  For courses of study that do not prepare transcripts, a letter from the instructor/educator/administrator from the institution must be provided regarding the satisfactory completion of study.

FAILURE TO DO SO WILL RESULT IN THE REVOCATION OF ANY NON-AWARDED GRANTS AND THE REVOCATION OF FUTURE AVAILABILITY FOR FUTURE GRANTS.  IF YOU RECEIVED AN AWARD LAST YEAR AND DO NOT PROVIDE THIS WITH YOUR APPLICATION HERE, IT WILL BE REJECTED

PLEASE NOTE THAT IF YOU RECEIVE AN AWARD, IT IS FOR THE CALENDAR YEAR LISTED ONLY.  YOU WILL NEED TO RE-APPLY FOR EACH YEAR.

Questions, problems?  Please contact Foundation President, John Coyle, johndcoyle@gmail.com 973-801-0454

| APPLICANT INFORMATION | | |
|---|---|---|
| Name: | | |
| Date of birth: | Email | Phone: |
| Current address: | | |
| City: | State: | ZIP Code: |
| Are you related to a member of the Rutgers University chapters of Alpha Delta EPSILON or Alpha Gamma Rho? | If yes, identify the Member and the year the Member joined ADE. | |
| What is your relation to the Member? | | |
| Member's contact information:  Telephone, address, email | | |

| CURRENT EDUCATION INFORMATION (2020-2021 YEAR) | | |
|---|---|---|
| School: | | |
| Address: | | Projected graduation year: |
| Phone: | E-mail: | Fax: |
| City: | State: | ZIP Code: |
| Guidance counselor name: | | GPA on 4.0 scale if applicable: |

| Guidance counselor email: | | |
|---|---|---|
| Will you continue attending this school in the 2021-2022 academic year? | | |

| **UPCOMING EDUCATION INFORMATION** | | |
|---|---|---|
| School for 2020-2021 if different from current year: | | |
| Address: | Phone: | |
| City: | State: | ZIP: |
| Have you been admitted?<br>If yes, please attach acceptance letter unless currently attending. | | |
| When did you/will you begin attending? | | |
| Major or focus of study: | GPA and Class Rank, if applicable | |
| Estimated graduation date: | Current career goal/s: | |
| What is the total tuition/cost for academic year 2021-2022? | | |
| List the amount of any scholarships/grants you are receiving for the 2021-2022 year: | | |
| **I hereby represent and affirm that the information in this application is correct to the best of my knowledge.  I hereby permit, for publicity purposes, the use of any information included in this application.** | | |

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|---|---|
| Signature of applicant: | Date: |
| Signature of parent/guardian if applicant is under 18 | Date: |
| Signature of Member | Date: |

| **MANDATORY ESSAY:** |
|---|
| **Is there anything else you would like the Committee to know about you? Why you should receive a scholarship, how it will benefit you, etc.? Please limit the essay to no more than 500 words**<br><br>**Please type the essay and attach to the application** |
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