



**ZETA PHI BETA SORORITY,  
INCORPORATED  
THETA ALPHA ZETA CHAPTER  
2025 Scholarship Application**

**Application Deadline: March 15, 2025**



*ZETA PHI BETA SORORITY, INCORPORATED*  
THETA ALPHA ZETA CHAPTER  
PO Box 30226 | Rochester, New York | 14603

Dear Applicant,

Zeta Phi Beta Sorority, Incorporated is an international community-conscious, action-oriented organization established January 16, 1920 in Washington, D.C. This non-profit organization, formed on the campus of Howard University by five college co-eds, consists of over 125,000 college-educated, dynamic, community service driven, diverse and professional women. For over 100 years, Zeta Phi Beta Sorority, Incorporated has dedicated itself to fostering the ideals of Service, Scholarship, Sisterhood, and Finer Womanhood for the continuous education of young adults. For more information about this great sorority, please visit [zphib1920.org](http://zphib1920.org).

Theta Alpha Zeta Chapter is one of the Rochester Alumni Chapters of Zeta Phi Beta Sorority, Incorporated. Theta Alpha Zeta has been active in the community since 1975. The Chapter presents scholarships, annually, to college-bound high school seniors. To date, Theta Alpha Zeta has awarded over \$110,000 in scholarship funds. For more information about Theta Alpha Zeta Chapter, please visit [RochesterZetas.org](http://RochesterZetas.org) or email us at [RochesterZetas@hotmail.com](mailto:RochesterZetas@hotmail.com).

We are proud to announce we are now accepting applications for the **MAXINE GOODEN SCHOLARSHIP**, the **LORRAINE W. CLEMENT OPPORTUNITY SCHOLARSHIP**, and the **THETA ALPHA ZETA CHAPTER SCHOLARSHIP**. We award scholarships to graduating high school seniors in Monroe County. To successfully compete for the award, recipients must apply to, enroll in, and attend an accredited college or university in the Fall of 2025 as a full-time student. We encourage you to apply today for the Maxine Gooden, the Lorraine W. Clement, and the Theta Alpha Zeta Chapter Scholarships.

Zeta Phi Beta Sorority, Inc.,  
Theta Alpha Zeta Chapter  
Scholarship Committee



## SCHOLARSHIP INFORMATION

### AVAILABLE SCHOLARSHIPS

The scholarship committee will select three recipients based on their scholastic aptitude, academic performance, community involvement, extracurricular activities, demonstrated leadership skills, and an essay response. We have three scholarships available.

- *The Maxine Gooden Scholarship:* Applicants must have a minimum of 3.0 GPA on a 4.0 scale (or equivalent on a 5.0 scale)
- *The Lorraine W. Clement Opportunity Scholarship:* Applicants must have a minimum of 2.75 GPA on a 4.0 scale (or equivalent on a 5.0 scale)
- *Theta Alpha Zeta Scholarship:* Applicants must have a minimum of a 2.5 GPA on a 4.0 scale (or equivalent on a 5.0 scale)

### APPLICANT CRITERIA

All applicants must possess a high school cumulative grade point average of 2.5 or above on a 4.0 grading scale. Additionally, all applicants must be:

- Currently enrolled as a high school senior
- Graduating in the Spring of the award year
- Enrolled in an accredited college or university for the Fall semester of the award year
- A student attending a school in Monroe County, New York

### APPLICATION INSTRUCTIONS

The Scholarship Committee will only accept and process completed applications that include the attached completed application with a personal essay, a color professional headshot, two (2) letters of recommendation, and official transcripts. Except for the transcripts, which your school should mail separately, you must combine all documents and photo into a single PDF file and email to:

**[SecondAnti.ThetaAlphaZeta@gmail.com](mailto:SecondAnti.ThetaAlphaZeta@gmail.com)**

**Subject: Theta Alpha Zeta Chapter 2025 Scholarship Application**

The committee will NOT process incomplete applications.



### ***Personal Essay***

You must type the personal essay. It must be at least one (1) page, but no more than two (2) pages in length. Please tell us about yourself and explain why we should select you to receive this scholarship. Your written essay should clearly demonstrate experiences or accomplishments in at least three (3) of the four (4) areas listed below:

1. **Special Talent:** Discuss a special attribute or accomplishment that sets you apart from your peers. Examples may include, but are not limited to: working well with others, artistic talents, athletic ability, public speaking or writing skills, a creative activity/challenge that you engage in, etc.
2. **Leadership and Service:** Clearly articulate how you have demonstrated your leadership ability both in and out of school. Examples may include, but are not limited to: community service involvement, leadership roles or unique responsibilities at home, school, church, etc.
3. **Challenges/Financial Need:** Describe how you have achieved a goal despite struggles or obstacles that may have hindered you. Provide a more detailed and personal account of your financial need. You may describe, from a financial standpoint, what impact this award would have on your education, or share any special circumstances affecting your need for financial assistance. Be specific. Examples may include, but are not limited to: achievement of a goal despite struggles or barriers, withstanding significant peer pressure(s) that may have otherwise deterred your achievements, overcoming a major life event, etc.
4. **Influences:** Discuss situations or persons that have been major influences in your life. Examples may include, but are not limited to: how your personal background has affected your view of the world, an individual or group who has been your biggest influence and why, a book that has affected you deeply and why, etc.

### ***Color Professional Headshot (Digital / Scanned)***

Please provide a color headshot of yourself. The committee will not accept selfies or posed photographs other than headshots. You may include your photograph on your resume.

### ***Letters of Recommendation***

You must provide two (2) letters of recommendation using the appropriate form included at the end of this package. The recommenders must address their letters to the Scholarship Committee. We will not accept letters of recommendation addressed to other individuals and/or other organizations.

- One letter must be from a Counselor or a current Teacher.
- One letter must be from an Employer, Community Leader, Minister, or Mentor



Zeta Phi Beta Sorority, Inc.  
Theta Alpha Zeta Chapter

### ***Official Transcripts***

Theta Alpha Zeta Chapter will only accept transcripts stamped with an official school seal and signed by an authorized school administrator. **The school administrator must mail the official transcript in a sealed envelope to: Zeta Phi Beta Sorority, Inc., Theta Alpha Zeta Chapter, PO Box 30226, Rochester, NY 14603.**

### ***Applicant Certification & Statement of Agreement***

At the end of the application, you must certify, with your signature, that all information on this application and contents in the application package are true and correct to the best of your knowledge. If you receive this award, you must agree to submit proof of enrollment.

### **AWARD DISTRIBUTION**

Award recipients must provide enrollment verification from the accredited college or university you are attending before we distribute the scholarship money. You must submit this verification by email from the email assigned to you by the accredited school you are attending to:

**[SecondAnti.ThetaAlphaZeta@gmail.com](mailto:SecondAnti.ThetaAlphaZeta@gmail.com)  
Subject: 2025 Enrollment Verification**

Alternatively, you can mail a notarized copy to:

**ZETA PHI BETA SORORITY, INCORPORATED  
THETA ALPHA ZETA CHAPTER  
Scholarship Committee  
PO Box 30226 | Rochester, New York | 14603**

### **DEADLINE**

The Scholarship Committee will not consider incomplete or late applications. Please submit your completed Scholarship Application no later than

**MARCH 15, 2025 11:59 PM ET**



Zeta Phi Beta Sorority, Inc.  
Theta Alpha Zeta Chapter

## SCHOLARSHIP APPLICATION

*Please type. We will only consider typed applications. Email the completed application, with all sections combined to:*

**SecondAnti.ThetaAlphaZeta@gmail.com**  
**Subject: Theta Alpha Zeta Chapter 2025 Scholarship Application**

### APPLICANT INFORMATION

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name of School presently attending: \_\_\_\_\_

Graduation Date:

Cumulative Grade Point Average:

***If you are related to a member of any of the following, list their names:***

Zeta Phi Beta Sorority, Inc.      Name:

Zeta Amicae                      Name:

Zeta Youth                        Name:

Phi Beta Sigma Fraternity, Inc.      Name:



### ACTIVITIES, HONORS, AND COMMUNITY SERVICE (VOLUNTEERING)

Please list the activities in which you have been involved (Include the dates starting with the most current activity)

Activity (Organization if outside of school)	Leadership Roles	Special Awards or Recognition	Years Participated (Check all years that apply)			
			9	10	11	12

### FUTURE PLANS

Please list the college(s) to which you applied (in order of preference)

<i>Name of College</i>	<i>Location (City, State)</i>	<i>Accepted</i> (Indicate Yes or No)

What is your intended major? \_\_\_\_\_



**Zeta Phi Beta Sorority, Inc.**  
**Theta Alpha Zeta Chapter**

Intended minor (if any)? \_\_\_\_\_





## INTERVIEW

Part of the application process includes an interview. If selected as a finalist, we will contact you for an interview date and time. **We strongly suggest that you wear professional attire, practice body language, and be mindful of your communication skills for the interview.** Please select the days that will work best for you. **(Please note if selected for the next phase, interviews will take place the week of March 24-29, 2025, please plan accordingly.)**

Tuesday

Thursday

Wednesday

Saturday

## APPLICANT

I certify and affirm that all information on this application and contents in the application package are true and correct to the best of my knowledge. If I receive this award, I agree to submit proof of enrollment

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/ Guardian: \_\_\_\_\_ Date: \_\_\_\_\_



Zeta Phi Beta Sorority, Inc.  
Theta Alpha Zeta Chapter

## SCHOLARSHIP REFERENCE FORM

### COUNSELOR/CURRENT TEACHER

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Please provide your typewritten feedback:

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Reference: \_\_\_\_\_

### PLEASE INDICATE YOUR RELATION TO THE APPLICANT:

Counselor

Current Teacher

### PLEASE COMMENT BRIEFLY ON THE FOLLOWING POINTS RELATING TO THE APPLICANT'S QUALIFICATIONS:

#### *Character:*

Overall assessment of personality, poise, and distinguishing traits.

#### *Scholastic Performance:*

Assessment of the applicant's academic performance, such as grades, test scores, rank in class, etc., if you have such information.



Zeta Phi Beta Sorority, Inc.  
Theta Alpha Zeta Chapter

***Leadership:***

Assessment of the applicant’s capability to take on responsibility and command situations when needed.

***Initiative:***

Assessment of applicant’s ability to be a self-starter, develop ideas, begin projects.

Please feel free to use a separate page and/or attach to this form any comments regarding additional qualities of the applicant.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**DEADLINE AND MAILING INSTRUCTIONS**

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If you have questions of the Scholarship Committee, please contact us:

**[SecondAnti.ThetaAlphaZeta@gmail.com](mailto:SecondAnti.ThetaAlphaZeta@gmail.com)**

**Subject: Theta Alpha Zeta Chapter 2025 Scholarship Application QUESTIONS**



Zeta Phi Beta Sorority, Inc.  
Theta Alpha Zeta Chapter

## SCHOLARSHIP REFERENCE FORM

### COMMUNITY LEADER/ MINISTER/MENTOR

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Please provide your typewritten feedback:

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Reference: \_\_\_\_\_

### PLEASE INDICATE YOUR RELATION TO THE APPLICANT:

Community Leader

Minister

Mentor

### PLEASE COMMENT BRIEFLY ON THE FOLLOWING POINTS RELATING TO THE APPLICANT'S QUALIFICATIONS:

#### *Character:*

Overall assessment of personality, poise, and distinguishing traits.

#### *Scholastic Performance:*

Assessment of the applicant's academic performance, such as grades, test scores, rank in class, etc., if you have such information.



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Please feel free to use a separate page and/or attach to this form any comments regarding additional qualities of the applicant.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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