

# Alpha Kappa Alpha Sorority, Incorporated®

## Omega Delta Omega Chapter

[www.AKAODO.org](http://www.AKAODO.org)

### Omega Delta Omega Academic Scholarship Description

The Omega Delta Omega Chapter of Alpha Kappa Alpha Sorority, Incorporated ® will provide competitive academic scholarships in the amount of \$2,500 each for the 2024-2025 academic school year. Scholarships are designated for African American female students and are to be applied towards expenses directly related to their college education (tuition, fees, room and board, books, etc.).

### Scholarship Eligibility Requirements

Students are *eligible* to be considered if they meet all the following criteria:

1. A graduating high school senior enrolling in a four-year college or university
2. African American female student
3. Have a current minimum cumulative GPA of 3.00.
4. Demonstrated history of community service
5. A resident of Riverside County or San Bernardino County, California

Students must also currently attend one of the following schools:

Alta Loma High School, Alta Loma, CA Ayala High School, Chino Hills, CA	Norco High School, Norco, CA
CentennialHigh School, Corona, CA Chaffey High School, Ontario, CA	Ontario High School, Ontario, CA Ontario Christian, Ontario, CA
Chaffey District Online High School, Ontario, CA Chino High School, Chino, CA	Palm Desert High School, Palm Desert, CA Palm Springs High School, Palm Springs, CA
Chino Hills High School, Chino Hills, CA Citrus Valley High School, Redlands, CA	Rancho Cucamonga High School, Rancho Cucamonga, CA
Colony High School, Ontario, CA Corona High School, Corona, CA	Redlands East Valley High School, Redlands, CA Redlands High School, Redlands, CA
Desert Hot Springs High School, Desert Hot Springs, CA Don Antonio Lugo High School, Chino, CA	Rubidoux High School, Jurupa Valley, CA
Eleanor Roosevelt High School, Eastvale, CA Etiwanda High School, Rancho Cucamonga, CA	Santiago High School, Corona, CA
JFK Middle College, Norco CA Jurupa Valley High School, Jurupa Valley, CA	Upland Christian, Rancho Cucamonga, CA Upland High School, Upland, CA
Los Osos High School, Rancho Cucamonga, CA	Valley View High School, Moreno Valley, CA
Moreno Valley High School, Moreno Valley, CA	Vista Del Lago High School, Moreno Valley, CA  Other High School not listed in San Bernardino and Riverside Counties

**Applicant Full Name** \_\_\_\_\_

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**Scholarship Program Timeline**

Application Deadline: April 19, 2024

Notification to Scholarship Recipients: April 26, 2024\*

\*Recipients will be notified of the date, time and location for the awards ceremony.

To avoid disqualification from consideration, please comply with all the following requirements:

1. Submit a **complete application packet**. A complete application packet consists of the following items:
  - a. Completed Omega Delta Omega Academic Scholarship Application form, including a 500-word essay.
  - b. Official transcript(s) or an Unofficial transcript(s) emailed directly from school counselor to [scholarship@akaodo.org](mailto:scholarship@akaodo.org).
  - c. Letter of Recommendation. A Letter of Recommendation should be submitted by persons other than friends or relatives. The letter must be from church affiliates, teachers, counselors or community members. Please submit with the attached Letter of Recommendation form as an added document.
2. Email the complete application packet to: [scholarship@akaodo.org](mailto:scholarship@akaodo.org)
3. For additional information please contact Bria Edgar at [briaedgarpcc@gmail.com](mailto:briaedgarpcc@gmail.com)

**APPLICATION PACKETS MUST BE SUBMITTED BY April 19, 2024**

***INCOMPLETE APPLICATION PACKETS AND/OR APPLICATION PACKETS THAT ARE RECEIVED AFTER APRIL 19, 2024 WILL NOT BE CONSIDERED.***

Applicant Full Name \_\_\_\_\_

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**Omega Delta Omega Academic Scholarship Application Form**

*Please type in this form.  
Additional pages may be added as necessary*

**Section A: Applicant Information**

Legal Name (First, Middle, Last): \_\_\_\_\_

Date of Birth (mm/dd/yyyy): \_\_\_\_\_ Gender: \_\_\_\_\_

Ethnicity: \_\_\_\_\_

Street Address: City and Zip: \_\_\_\_\_

County: \_\_\_\_\_

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

E-mail address: \_\_\_\_\_

Name and City of High School: \_\_\_\_\_

Name of High School Counselor: \_\_\_\_\_

High School Counselor Phone Number: \_\_\_\_\_

High School Counselor Email Address: \_\_\_\_\_

High School Graduation Date: \_\_\_\_\_ Cumulative G.P.A.: \_\_\_\_\_

Academic Honors: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Service Awards/Recognitions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Section A1: Parent/Legal Guardian Information**

*(Must be completed if applicant is under 18 years of age)*

Legal Name (First, Middle, Last): \_\_\_\_\_

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

City and Zip Code: County: \_\_\_\_\_

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

E-mail address: \_\_\_\_\_

**Applicant Full Name** \_\_\_\_\_

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**Section B: Leadership, Volunteer/Academic Service Activities-School Extra-Curricular Activities**

Description of Activity: \_\_\_\_\_  
\_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Description of Activity: \_\_\_\_\_  
\_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Description of Activity: \_\_\_\_\_  
\_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**Organizations in which you have membership and/or are involved in (i.e. Church, Community Service organizations, Charitable foundations):**

Organization Name: \_\_\_\_\_ Number of Hours: \_\_\_\_\_

Description of Activities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Organization Name: \_\_\_\_\_ Number of Hours: \_\_\_\_\_

Description of Activities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Organization Name: \_\_\_\_\_ Number of Hours: \_\_\_\_\_

Description of Activities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Section C: University/ 4 Year College Acceptance**

Name, city, and state of university/college in which you have been accepted to, and plan to enroll:

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**Section D: Essay**

Please write an essay, up to 500 words, on what disciplines and/or life skills have you developed over the course of your high school career that will assist you in successful matriculation through college. ***The essay must be typed and attached with application. Handwritten essays will not be accepted.***

**Applicant Full Name** \_\_\_\_\_

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*www.AKAODO.org*

**OMEGA DELTA OMEGA ACADEMIC SCHOLARSHIP  
LETTER OF RECOMMENDATION FORM**

Applicant Name (First, Middle, Last): \_\_\_\_\_

**Recommender Information:**

Name (First, Middle, Last): \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Length of Relationship: \_\_\_\_\_

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

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

E-mail address: \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation/Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please email this form and the recommendation letter to: [scholarship@akaodo.org](mailto:scholarship@akaodo.org)

**Applicant Full Name** \_\_\_\_\_