

Alpha Phi Alpha Fraternity, Inc. Alpha Lambda Education Foundation

Academic Scholarship Application 2023 – 2024 Academic Year

Deadline: December 4, 2023

Purpose: The Alpha Lambda Education Foundation offers scholarships to African-American and Latino males who plan to attend an accredited University/College. Applications are reviewed by the Fraternity's scholarship committee to recommend scholarship winners for the upcoming academic year.

Criteria: Eligible applicant(s) will be a male high school senior of African-American or Latino descent planning to attend an accredited University/College for the 2024 – 2025 Academic Year. Eligibility also requires a minimal grade point average of 2.5 on a 4.0 scale, residence in Metro Louisville, and completion of the required essay. Late and/or incomplete application packets will not be considered.

Award: \$1,000.00

Applicant Packet Checklist:

- ✓ Completed Academic Scholarship Application
- ✓ Headshot Photograph of Applicant Wearing a Dress Shirt, Tie, and Jacket (Cellphone quality is permissible)
- ✓ Completed W9 Form
- √ High School Transcript
- ✓ Typed Essay, MLA Format, 500 Word Maximum, 12pt Font with One-Inch Margins (the topic is located in the application)

Application Submission: Applicant should submit the completed application packet (see Application Packet Checklist) using the option below:

Electronic. Packet submitted in one email with all items as attachments on or before 11:59 p.m. EST December 4, 2023 to: ALEFBoard@gmail.com

(*Note, special consideration will be given to early submissions).

Contact: Questions regarding the scholarship requirements or process should be directed to Alpha Lambda Scholarship at: ALEFBoard@gmail.com

If Selected: Applicant(s) selected to receive the Alpha Lambda Education Foundation Academic Scholarship will receive a complementary ticket (+1 guest) to attend the 2024 Hope Breakfast on January 15th, 2024 and be recognized by the men of Alpha Phi Alpha Fraternity, Incorporated. Additional tickets may be purchased until the event is sold out.

*Due to COVID-19 restrictions, the event <u>may</u> be hosted using a virtual alternative. Applicant(s) selected to receive a scholarship award will be expected to participate – including cooperating with the planning committee with adjustments to accommodate a virtual alternative.

Proof of Registration: If selected to receive the Alpha Lambda Education Foundation Academic Scholarship, the applicant(s) will be required to produce a letter of acceptance and a copy of their class schedule for the Fall 2024 semester as proof of registration to an accredited University or College. Class registration will be verified before the scholarship dollars are released. Failure to provide this information by **August 4, 2024** will result in forfeiting the scholarship award and will require no further communication from the Alpha Lambda Education Foundation or the applicant(s) regarding the scholarship award.

Please print or type all the information on the application.

Basic Information									
Name:	Student's	Cell Phone	#	Student's Email Address:					
Address:	City:			State:		Zip Code:			
Race:	Sex:			Age:					
Name o	f High S	chool A	ttendi	ing					
School Name: Unweighted G. P. A. On a Scale of:									
				With IG B					
Counselor's Name:			Weighted G. P. A. On a Scale of						
Counselor's Email Address:			Composite ACT Score Composite SAT Score						
Address:	City: State					Zip Code:			
Extr	racurricul	lar Activ	vities						
High School Activities:		Teacher/0		ame(s):					
Offices Held:	Offices Held:		Teacher/Coach Contact Number(s):						
Community Activities: Act		Activity (Activity Coordinator Name(s):						
Offices Held:		Activity Coordinator Contact Number(s):							
Church or Religious Activities (Give name of church)):	Activity (Activity Coordinator Name(s):						
Offices Held: Activi			tivity Coordinator Contact Number(s):						
Hobbies:									
Did you participate in Alpha Academy through Kammerer Middle School? If so, please list the year(s):									
College/University planning to attend:			Major:	ajor:					
Scholarship Deliverables (to be completed by applicant)									
(Information in this section should be submitted as an attachment)									
Completed Academic Scholarship Application									
2. Headshot Photograph of the Applicant Wearing a Dress Shirt, Tie, and Jacket (Mobile Cellular Phone Quality is Okay)									
3. Completed W9 Form									
2. High School Transcript									
 Typed Essay, MLA Format, 500 words, 12pt Font with One-Inch Margins. Responding to the following prompt: Why MLK's Work has Given Me Hope (include your favorite MLK quote) 									

Student Certification							
Statement of Applicant: I, certify that I meet the qualifications for this scholarship, that I will be a full-time student at a College/University during the accurate. Circle 6.4 - 11:							
Signature of Applicant:	Date:						
Parent/Guardian Information and Consent							
Name of Parent (s)/Guardian(s)			Cell Phone # of Parent(s)/Guardian(s)			
Address	City		State	Zip Code			
Statement of Parent or Guardian:							
I, have read the application in full and hereby state that, with my consent,							
(student's name) is applying for the Alpha Phi Alpha Fraternity Incorporated's							
Alpha Lambda Education Foundation Academic Scholarship.							
Signature of Parent or Guardian (if under 18 years of age):		Date:					
Relationship to Applicant:							



Alpha Phi Alpha Fraternity, Incorporated Alpha Lambda Chapter Alpha Lambda Education Foundation

PHOTO/VIDEO CONSENT FORM

Please complete this form and email it along with a headshot of the Applicant wearing a dress shirt, tie, and jacket (Cellphone photo quality is permissible) to ALEFBoard@gmail.com. Scholarship recipient headshots/photos will be displayed during our annual MLK Hope Breakfast.

I, the undersigned, voluntarily consent to be photographed and/or videotaped. I understand that the intended use of the photograph/video tape(s), and my name, image and likeness is for publicity, education or public information efforts for the Alpha Lambda Chapter of Alpha Phi Alpha Fraternity, Inc. (A Λ) and the Alpha Lambda Education Foundation (ALEF) for print and the internet. I authorize any such use, by or on behalf of A Λ or ALEF, of the photograph/video tape(s), and my name, image and likeness. I understand that I will not be paid or compensated by A Λ or ALEF in any way for the taking or lawful use of any photograph/video tape(s), and my name, image and likeness.

I hereby release and discharge $A\Lambda$ and ALEF, its members, agents and representatives from any claims, liability or results caused by the lawful use of said photograph/video tape(s), and my name, image and likeness, which I have now voluntarily authorized as a gift to $A\Lambda$ and ALEF.

Scholarship Applicant Printed Name:
Scholarship Applicant Signature:
Date of Birth:
Parent/Guardian Printed Name:
Parent/Guardian Signature:
Phone Number:
E-mail Address:
Date:

Form (Rev. October 2018) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do	not leave this line blank.											
Ì	2 Business name/disregarded entity name, if different from above												
Print or type. Specific Instructions on page 3.	following seven boxes. Individual/sole proprietor or C Corporation S Corporation Partnership Trust/estate					Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)							
Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check the LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. Other (see instructions)								code (if any)					
ᇮ	5 Address (number, street, and apt. or suite no.) See instructions. Requester's name			s name	and address (optional)								
8	ee S												
6 City, state, and ZIP code			Alpha Lan	Alpha Lambda Education Foundation									
	7 List account number(s) here (optional)												
Par	Taxpayer Identification Number (TIN)												
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to average backup withholding. For individuals, this is generally your social security number (SSN). However, for resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get TIN, later. Note: If the account is in more than one name, see the instructions for line 1. Also see What Name Number To Give the Requester for guidelines on whose number to enter.		ora ta or		er identification number									
Part	Certification												
	penalties of perjury, I certify that:												
2. I am Serv	number shown on this form is my correct taxpayer identification numb not subject to backup withholding because: (a) I am exempt from bact ce (IRS) that I am subject to backup withholding as a result of a failure nger subject to backup withholding; and	kup withholding, or (b)	I have not	been	notifie	ed by	the In	temal					
3. I am	a U.S. citizen or other U.S. person (defined below); and												
4. The	FATCA code(s) entered on this form (if any) indicating that I am exemp	t from FATCA reportin	g is correc	t.									
you hav acquisi	ation instructions. You must cross out item 2 above if you have been no e failed to report all interest and dividends on your tax return. For real esta ion or abandonment of secured property, cancellation of debt, contribution an interest and dividends, you are not required to sign the certification, but	ate transactions, item 2 ons to an individual retir	does not a ement arra	pply. F	or mo	rtgage A), and	inter gene	rest pa erally, p	id, ayme	nts			
Sign Here	Signature of U.S. person ►		Date ►										
Ger	eral Instructions	Form 1099-DIV (dir funds)	vidends, in	cludin	g thos	e fron	n sto	cks or	mutu	al			
Section	references are to the Internal Revenue Code unless otherwise	• Form 1000 MICC (haniana torr		inee	e ed		unarda					

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

. Form 1099-INT (interest earned or paid)

- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.