



**EDWARD G. IRVIN SCHOLARSHIP
FOUNDATION
CHICAGO ALUMNI CHAPTER
*Kappa Alpha Psi Fraternity, Inc.***

Eligibility Requirements for Scholarship Applicants

- Chicago Area graduating high school male of African-American descent;
- Minimum cumulative GPA of 3.0 (on a 4.0 scale);
- Completion of ACT and/or SAT standard exam; and
- Active participation in extracurricular activities and/or community service programs

Eligibility Requirements for Maintaining Scholarship

- Submit official documentation certifying enrollment in an accredited four (4) year college or university institution;
- Maintain a minimum 2.75 GPA each semester and on a cumulative basis for the duration college attendance. Official documentation certifying the required GPA must accompany the enrollment data and must be received by the Scholarship Chairman before the award will be issued;
- Any indecent, immoral or illegal activity shall constitute grounds for the termination of this award;
- In the event that the scholarship recipient chooses to complete an intake program, join or undergo initiation in another social Greek Letter Organization, the scholarship awarded by the Chicago Alumni Chapter of Kappa Alpha Psi Fraternity, Inc. will be discontinued at such time. Moreover, it is our hope that the fellow organization will assume responsibility for providing the recipient with future financial assistance; and
- To continue to receive this award, your credentials and eligibility will be reviewed on a semester basis.



**CHICAGO ALUMNI CHAPTER
KAPPA ALPHA PSI FRATERNITY, INC.
EDWARD G. IRVIN SCHOLARSHIP FOUNDATION
SCHOLARSHIP APPLICATION**

DIRECTIONS: Student, please complete sections as indicated. Attach photograph and return application to **Mr. James Alexander, Edward G. Irvin Foundation, 500 E. 67th Street Chicago, IL 60637**. Please refer to the attached list of eligibility requirements before completing this application. In addition, please note that all applications **MUST** be typed.

Student's Name

Home Address

City

State /Zip

Home Phone Number

Mobile Phone Number

Email Address

High School Name

G.P.A

Class Rank (e.g.: 1 out of 300)

ACT/SAT Score

College or University you plan to attend

Planned College Major

Planned College Minor

By signing below, I certify that all information provided herein is accurate and that I plan to enroll in a 4yr College/University during the Fall of 2024.

Student's Signature: _____

Parent's Signature: _____

Principal's Signature: _____

(Optional) Kappa Alpha Psi Member Signature: _____

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STUDENT: Complete questions below: (Please use separate sheet of paper if necessary.)

List school and co-curricular activities:

List community service activities:

Why do you feel that you are deserving of this scholarship?

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Please provide an autobiography (300 words or less).

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This section is to be completed by student and parent/guardian:

ANNUAL FINANCIAL ANALYSIS

A. ESTIMATED COLLEGE EXPENSES

Tuition and Fees \$ _____

Books and Supplies \$ _____

Room and Board \$ _____

Personal (Clothing, recreation, etc.) \$ _____

Transportation (To and from school) \$ _____

ESTIMATED TOTAL EXPENSES \$ _____

B. RESOURCES

Parent's Total Annual Income \$ _____

Applicant's Summer Employment Income \$ _____

Total Family Savings \$ _____

Other Assistance (i.e. child support, alimony, inheritance, etc.) \$ _____

TOTAL RESOURCES \$ _____

C. OTHER SCHOLARSHIPS / FINANCIAL AID

<u>Name</u>	<u>Date of Application</u>	<u>\$ Amount Awarded</u>	<u>\$ Amount Pending</u>

D. TOTAL NUMBER OF FAMILY MEMBERS WITHIN THE HOUSEHOLD (including applicant) _____

E. TOTAL NUMBER OF FAMILY MEMBERS ENROLLED IN COLLEGE (including applicant) _____

Additional Financial Information:

Checklist: APPLICATIONS DUE NO LATER THAN FRIDAY, APRIL 12, 2024

_____ **Application typed & complete?**

_____ **Official High School Transcript Enclosed?**

_____ **Minimum of one letter of recommendation Enclosed?**