

*Alpha Kappa Alpha Sorority, Inc.®  
Zeta Nu Omega Chapter  
in partnership with  
ZNO Community Service Fund, Inc.*



**ZNO Scholarship Application**

Alpha Kappa Alpha Sorority, Incorporated® is the first African American Sorority, founded on the campus of Howard University in 1908. The ZNO Community Service Fund Inc. (ZNO-CSF, Inc), a 501 (c)(3) organization, was incorporated in 1982, by New York State and established by Alpha Kappa Alpha Sorority, Incorporated®, –Zeta Nu Omega Chapter, to provide service to Westchester County residents. Most notably, the ZNO-CSF, Inc. has awarded over \$750,000 in scholarships to high school students across Westchester County. This year's application deadline is **Friday, March 28, 2025 at 11:59 p.m.**

**2025 ZNO Scholarship Application Requirements**

Completed applications must include the following information and documentation. Your application will be considered **INCOMPLETE** if this information is not emailed to [znoscholarship@znoaka.org](mailto:znoscholarship@znoaka.org) by the application deadline:

- A Well -Written Essay using **one** of the following prompts (300 - 400 Words in Length):
  - Personal essay highlighting your community service involvement during your four years of high school.
  - High School is where many students discover themselves. Please introduce yourself to the scholarship committee and tell us what you discovered about yourself in your four years of high School.
  - It is 2035 and you have been selected to speak to the incoming freshman class of your high school. What advice would you give the students to aid them in having a successful high school career?
- Grade Point Average (GPA) of a B (80) Cumulative Average or Better (Official Transcript and School Profile (including Grading Scale))
- Three Letters of Recommendation (Preferably from Educators) which speak to the Applicant's Character, Academic Accomplishments, Community Service, and Skill
- A Copy of the Applicant's Financial Aid Award Letter or Estimate stating Tuition Expense for the 2025 - 2026 Academic Year
- A Copy of the Applicant's College/University Acceptance Letter for the 2025 - 2026 Academic Year

**HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED. THE APPLICATION IS PDF WRITABLE AND IT MUST BE TYPED. Please submit the application and essay in one PDF file.**

**Selection of Scholarship**

The ZNO Scholarship Committee is providing three options for scholarship award this year. Scholarships will be granted to applicants who meet all of the application requirements and have a successful interview. Applicants should select the scholarship that they would like to be in consideration to receive. The three options are as follows:

- ZNO Community Service Fund Scholarship
- ZNO HBCU Scholarship
- ZNO Performing and Fine Arts Scholarship
- ZNO Community College Scholarship

**Please note the following information:**

- Students applying for the **Performing and Fine Arts Scholarship** will be given three minutes to display their area of talent as a part of their interview process.
- The Community College Scholarship is for students who will be attending a Community College

**Important Information Concerning the Scholarship Interview Process**

Once applications have been reviewed, the qualified applicant and their school counselor will receive an emailed letter notifying them of the date and time of their ZOOM interview with the ZNO Scholarship Committee. **Please note qualified applicants will need to be available in the evening during the week of May 5<sup>th</sup>. Applicants who qualify for an interview will be contacted via email.**

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**Applicant Information**

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Home Phone: \_\_\_\_\_ Cellular Phone: \_\_\_\_\_

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

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

Scholarship Selection: (Applicants can only select one scholarship option) (Check One)

- ZNO Community Service Fund Scholarship       ZNO Community College Scholarship  
 ZNO HBCU Scholarship       ZNO Performing and Fine Arts Scholarship

**Academic Record**

High School: \_\_\_\_\_

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

Number of Years at this High School: \_\_\_\_\_ Years

School Counselor's Name (First and Last): \_\_\_\_\_

School Counselor's Email Address: \_\_\_\_\_

School Counselor's Telephone Number: \_\_\_\_\_

Extracurricular Activities:

_____	Years of Participation: _____
_____	Years of Participation: _____
_____	Years of Participation: _____
_____	Years of Participation: _____

Offices Held:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Years in Office: \_\_\_\_\_

Years in Office: \_\_\_\_\_

Years in Office: \_\_\_\_\_

Honors Received:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Grade: 9 10 11 12

Grade: 9 10 11 12

Grade: 9 10 11 12

Grade: 9 10 11 12

Please state the date and time of your high school's Senior Convocation/Awards Night/Assembly/Graduation?

Example: May 10, 2025

Example: 7:00p.m.

**Family Information**

*Please complete this section as thoroughly as possible.*

Parent's Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Contact Information: \_\_\_\_\_ (Phone or Email)

Number of Siblings  
Attending College: \_\_\_\_\_

**Employment/ Volunteer Information**

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

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

Position Held: \_\_\_\_\_ Number of Hours Per Week: \_\_\_\_\_

Length of Employment/ Volunteer Service:  
\_\_\_\_\_

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

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

Position Held: \_\_\_\_\_ Number of Hours Per Week: \_\_\_\_\_

Length of Employment/ Volunteer Service:  
\_\_\_\_\_

**Essay Questions**

Please select one of the listed prompts and complete a 300 – 400 word essay

**Essay Prompt #1**

Personal essay highlighting your community service involvement during your four years of high school.

**Essay Prompt #2**

High School is where many students discover themselves. Please introduce yourself to the scholarship committee and tell us what you discovered about yourself in your four years of high school.

**Essay Prompt #3**

It is 2035 and you have been selected to speak to the Incoming Freshman Class of your high school. What advice would you give the students to aid them in having a successful high school career.

**College/University Information**

Please list the colleges/universities where you have applied:

- |       |                          |                            |
|-------|--------------------------|----------------------------|
| _____ | <input type="checkbox"/> | Acceptance Letter Received |
| _____ | <input type="checkbox"/> | Acceptance Letter Received |
| _____ | <input type="checkbox"/> | Acceptance Letter Received |
| _____ | <input type="checkbox"/> | Acceptance Letter Received |
| _____ | <input type="checkbox"/> | Acceptance Letter Received |

Anticipated Area of College/University Study:

Major (If Known) \_\_\_\_\_

Minor (If Known) \_\_\_\_\_

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge. It is also my responsibility as an applicant to keep the ZNO Scholarship Committee abreast of any changes to my mailing and email addresses as well as telephone number.*

*Please note all supporting documents necessary to complete this application must be emailed by*

**Friday March 28, 2025 at 11:59 p.m. to [znoscholarship@znoaka.org](mailto:znoscholarship@znoaka.org).**

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

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## **Privacy Release Form**

I \_\_\_\_\_, parent(s) and/or guardian(s) of \_\_\_\_\_ hereby give  
*Print* *Print*

permission for *Alpha Kappa Alpha Sorority, Inc.®, Zeta Nu Omega Chapter* and any affiliates to take photo(s) in connection with all activities associated with the promotion, advertisement, and display of the “ZNO Scholarship Program” a community service event.

I understand that the photo(s)/video(s) will only be used in an appropriate manner by the *Alpha Kappa Alpha Sorority, Inc.®, Zeta Nu Omega Chapter* and any affiliates, and will reflect positively upon my child’s person, character, and reputation as well as the reputation of this prestigious organization.

I release and hold harmless *Alpha Kappa Alpha Sorority, Inc.®, Zeta Nu Omega Chapter* and any affiliates for any and all actions of others not associated or connected to the *Alpha Kappa Alpha Sorority, Inc.®, Zeta Nu Omega Chapter* and any affiliates, who may use, or attempt to use my child’s photo.

My signature as the parent(s) and/or guardian(s) and my child, (age 13 years and older), are affixed to this release and the date is evidence that we have read and understand this privacy release form.

\_\_\_\_\_  
*Child’s Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Mother/Guardian’s Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Father/Guardian’s Signature*

\_\_\_\_\_  
*Date*