



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

The ZNO Community Service Fund, Inc. (ZNO CSF) is a 501(c)(3) nonprofit organization established in 1982 by the Zeta Nu Omega Chapter of Alpha Kappa Alpha Sorority, Incorporated®. Dedicated to serving Westchester County, ZNO CSF has awarded more than \$750,000 in scholarships to local high school students. Alpha Kappa Alpha Sorority, Incorporated®, founded in 1908 at Howard University, is the first Greek-letter organization established by African American college-educated women.

### **2026 ZNO CSF Scholarship Application Requirements and Information**

1. This year's application deadline is **Friday, March 27, 2026, at 11:59 p.m.**
2. The completed application must be typed and submitted to [znoscholarship@znoaka.org](mailto:znoscholarship@znoaka.org).
3. Handwritten applications will NOT be accepted. The application form is PDF writable and must be typed.
4. Please submit the application and essay in one PDF file.
5. Applicants must be a resident of Westchester County or attend high school in Westchester County. The applicant must be a senior.
6. Applicants must have a Grade Point Average (GPA) of at least 3.0 or letter grade of B or numerical equivalent to 80 cumulative averages (Official Transcript to be submitted).
7. Applicant must submit two Letters of Recommendation (preferably from educators which speak to the applicant's character, academic accomplishments and community service involvement).
8. Applicants must submit a well-written essay using the prompts offered in the application form on the essay questions page.
9. If invited, the applicant will be requested to participate in a brief interview via Zoom with the ZNO Scholarship Committee during the first week of May. Applicant interviews are mandatory.

### **Selection of Scholarship Type**

ZNO CSF provides four options for scholarship awards this year. Applicants must choose ONE of the options for consideration. The four options are:

- ZNO Community Service Fund, Inc. Scholarship – open to all candidates
- HBCU Scholarship – candidate plans to attend an HBCU
- Performing and Fine Arts Scholarship – candidate chooses to showcase a performing arts or fine art talent
- Community College Scholarship – candidate plans to attend a Community College



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**Applicant Information**

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

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

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

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

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

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

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

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

**Academic Record**

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

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

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

School Counselor's Name (First and Last):

\_\_\_\_\_

School Counselor's Email Address:

\_\_\_\_\_

School Counselor's Telephone Number:

\_\_\_\_\_



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Extracurricular Activities:

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Years of Participation: \_\_\_\_\_

Years of Participation: \_\_\_\_\_

Years of Participation: \_\_\_\_\_

Years of Participation: \_\_\_\_\_

Offices Held:

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

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

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

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

Honors Received:

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Grade: 9 10 11 12

Grade: 9 10 11 12

Grade: 9 10 11 12

Grade: 9 10 11 12

### Family Information

*Please complete this section as thoroughly as possible.*

Parent/Guardian Name: \_\_\_\_\_

Telephone/Cell Phone#: \_\_\_\_\_

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

Parent/Guardian Name: \_\_\_\_\_

Telephone/Cell Phone#: \_\_\_\_\_

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



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**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 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 high school.

**Essay Prompt #3**

It is 2036 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) \_\_\_\_\_



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**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 27, 2026 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 \_\_\_\_\_

(Print) \_\_\_\_\_ (Print)

hereby give permission for *ZNO Community Service Fund, Inc. and 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 *ZNO Community Service Fund, Inc. and 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 *ZNO Community Service Fund, Inc. and Alpha Kappa Alpha Sorority, Inc.®, Zeta Nu Omega Chapter* and any affiliates for all actions of others not associated or connected to the *ZNO Community Service Fund, Inc. and 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, are affixed to this release and the date is evidence that we have read and understand this privacy release form.

\_\_\_\_\_  
*Student’s Signature*

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

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

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

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

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