

**IOTA PHI LAMBDA SORORITY, INC.**  
**FUTURE IOTA LEADERS**  
***SCHOLARSHIP REQUIREMENTS***

Iota Phi Lambda Sorority, Inc. is proud to offer a one-time \$1000.00 FIL Scholarship. This scholarship offers financial support and is awarded to a deserving FIL, a high school senior, who will pursue a degree in a business related field of study. The scholarship is for one year and will be sent directly to the college or university in which he/she attends.

The Iota Phi Lambda Sorority, Inc.'s Future Iota Leaders' scholarship will be decided during the month of April of each year and announced immediately. The winner will be selected on the basis of their SAT/ACT scores as well as additional eligibility requirements as selected by Iota Phi Lambda Sorority, Inc.

Judging criteria will include academic performance/achievement, career aspirations, demonstrated leadership, and financial need. A committee of non-partisan judges will judge all essays. All decisions of the judges are final. **Contestants with the supervision of sponsoring chapters must mail their applications to the National President Elect by February 28.**

**The scholarship applicant must:**

Be a graduating FIL (Future Iota Leader), male or female

Have a minimum GPA of 3.0

Submit a completed scholarship application

*Submit two letters of recommendation along with the **Recommendation Form** from any of the following:*

*High school teachers*

High school counselors

High school principal

Have an official (certified) high school transcript sent to the National President Elect

Submit a 300-500 word autobiographical essay that includes your career aspirations, leadership experience, and your most significant achievements.

All information should be included with the **Application Packet**

**Iota Phi Lambda Sorority, Inc.**  
**FUTURE IOTA LEADERS SCHOLARSHIP APPLICATION**



**STUDENT DATA**

*Please Print*

Name \_\_\_\_\_  
Last First MI

Social Security No: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Current Address \_\_\_\_\_  
Number Street Apt #

\_\_\_\_\_ City State Zip Code

\_\_\_\_\_ Telephone Email Address

**FAMILY PROFILE**

---

Father's Name

Address

Occupation

Check box, if deceased

---

Mother's Name

Address

Occupation

Check box, if deceased

---

Non-Parent/Guardian's Name

Address

Occupation

Check box, if deceased

Annual Household Income:

less than \$10,000

\$10,000-20,000

\$21,000-35,000

\$36,000-50,000

\$51,000-65,000

more than \$65,000

Number of people in your home (including yourself) \_\_\_\_\_

**ACADEMIC PROFILE**

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

Name

City

State

Cumulative GPA include scale: \_\_\_\_\_ Class Rank \_\_\_\_\_ Total Class Size \_\_\_\_\_

Dates of High School Attendance: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

SAT Total Score: \_\_\_\_\_ SAT Reading: \_\_\_\_\_ SAT Math: \_\_\_\_\_ SAT Writing: \_\_\_\_\_ Date Taken \_\_\_\_\_

ACT Score \_\_\_\_\_ Date Taken \_\_\_\_\_

Planned College/University: \_\_\_\_\_

Planned College Major: \_\_\_\_\_

## ACTIVITIES AND HONORS

List all extracurricular activities in which you have been involved (church, school, community) within the past four years. List them in order of interest to you.

---

---

---

---

List all honors and other distinctions received and submit documentation (clippings, letters, certificates, and other verification).

---

---

---

---

List your work experience (any jobs you have held) (List job, kind of work, employer, dates of employment, and hours/week).

---

---

---

---

Who has been most influential in your school life? In what way?

---

---

---

---

## RECOMMENDATIONS

List the name, title, address and telephone number of the **teacher, counselor, or school staff** who will submit a letter of recommendation for you. The letter should be returned to you, in a sealed envelope for inclusion with your application.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

List the name, title, address and telephone number of the **personal** reference (clergy, community leader, and employer) who will submit a letter of recommendation for you. The letter should be returned to you in a sealed envelope for inclusion with your application.

Name \_\_\_\_\_ Title: \_\_\_\_\_

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

## ESSAY

Please provide a 300-500 word double-spaced typewritten autobiographical essay. Please include your career aspirations, most significant leadership experiences, and your most significant achievements.

**The decisions of the judges are final.**

## DISCLOSURE

The information provided in this form will be disclosed only to Iota Phi Lambda Sorority as required to determine your eligibility for an award. All information will be properly disposed of according to the Record Retention/Disposition Policy of Iota Phi Lambda Sorority after award of the scholarship has been made.

I hereby certify that the information provided in this application is to the best of my knowledge, true and correct. I have not knowingly withheld any facts or circumstances that could otherwise jeopardize consideration of this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Legal Guardian's Signature

\_\_\_\_\_  
Date

**IOTA PHI LAMBDA SORORITY, INC.**

**FUTURE IOTA LEADERS SCHOLARSHIP  
REGISTRATION FORM**

Name of Contestant \_\_\_\_\_  
Last Name First Name Middle Name

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

High School Attending \_\_\_\_\_ Location \_\_\_\_\_

Sponsoring Chapter \_\_\_\_\_ Region \_\_\_\_\_

Sponsoring Chapter President \_\_\_\_\_

Chapter Scholarship Chairperson \_\_\_\_\_ Telephone \_\_\_\_\_

Address of Chairperson \_\_\_\_\_  
Street City State Zip Code

**PROSPECTIVE SCHOLARSHIP CANDIDATE SHOULD READ AND SIGN THE FOLLOWING:**

**I understand**

1. That I must attend a college or university and major in a related field of business.
2. That if I am a winner, all funds will be sent directly to the school of my choice to assist with my tuition after I have submitted the official document of my enrollment along with a schedule of my classes.
3. That the scholarship is a one-time award.
4. That any questions I have regarding the contest may be answered by the Chapter sponsoring me.
5. That I have read the above items and understand my rights.

\_\_\_\_\_  
Signature of Contestant

\_\_\_\_\_  
Date