



**Zeta Phi Beta Sorority, Inc. • Zeta Xi Zeta Chapter**

P.O. Box 2942 • Toledo, OH 43606

Dr. Stacie NC Grant - International President

Jamilah Jones-Martin - Chapter President



## **SCHOLARSHIP APPLICATION COVER SHEET & INFORMATION**

**\*\* Please include this coversheet with your completed application packet \*\***

### **2026 FINER WOMANHOOD SCHOLARSHIP**

**TWO AWARDS: Award Amounts: \$1000 each** (Each award is a one-time, non-renewable scholarship.)

#### **SCHOLARSHIP CRITERIA:**

- African-American/Black, female student
- High school senior graduating from any school in NW Ohio (Verification from guidance counselor or principal)
- GPA of 3.0 or higher on a 4.0 scale

#### **ALL APPLICATIONS MUST INCLUDE THE FOLLOWING:**

1. Completed /signed application coversheet, photo and Personal Statement
2. Résumé indicating leadership and/or volunteer experience
3. **Official academic transcript with official school seal/stamp**
4. List of 4-year colleges/universities or vocational/trade schools to which the applicant has applied
5. Two (2) Reference letters from any of the following non-relative sources: Teacher, School Counselor, Church or Community Leader, Supervisor (All professional letters should be signed and on Official Letterhead)
6. 500-word, typed, double-spaced essay on ONE of the following topics (Please indicate chosen topic)
  - ☐ Describe the financial impact a scholarship will have on your education and your commitment to a college education.
  - ☐ Describe traits of a great leader and how you have demonstrated them in school and your community.
  - ☐ **SPECIAL TOPIC:** What global issue do you feel connected to, and how do you see yourself contributing to its solution?

#### **APPLICANT INFORMATION:**

Name: \_\_\_\_\_ Current High School: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Parent(s)/Guardian(s) Names: \_\_\_\_\_

College/University or Vocational/Trade School Planning to Attend in 2026-27: \_\_\_\_\_

☐ **Yes!** I have a relative who is a member of **Zeta Phi Beta Sorority, Inc.** or **Phi Beta Sigma Fraternity, Inc.** or I have participated in a Zeta Auxiliary group.

Member Name & Chapter: \_\_\_\_\_ Relation: \_\_\_\_\_

Zeta Auxiliary: \_\_\_\_\_ Sponsoring Chapter/Location: \_\_\_\_\_

**DEADLINE:** All applications must be received by **Friday, March 27, 2026.**

Please send completed application packets, including this **COVER SHEET** to:

**Zeta Phi Beta Sorority, Inc. - Zeta Xi Zeta Graduate Chapter**

**P.O. Box 2942, Toledo, OH 43606**

**Attn: Scholarship Program Committee OR**

**Send to email: [ToledoZetaScholarship@gmail.com](mailto:ToledoZetaScholarship@gmail.com) (preferred method)**

**APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_**