



**A WISH, INC. ALPHA KAPPA ALPHA SORORITY,  
INCORPORATED® GAMMA MU OMEGA CHAPTER**

P.O. Box 10325  
Daytona Beach, Florida 32120



**General Scholarship Application Information**

The members of A WISH, INC., and Alpha Kappa Alpha Sorority, Incorporated®, Gamma Mu Omega Chapter believe that young people of today are an important part of our future. As an outward expression of this belief, we are proud to announce the 2024 Scholarship Award Program. The program is geared towards high school seniors attending an East Volusia County public high school.

A WISH, INC., is the 501© (3) public charity (tax-exempt) entity of Alpha Kappa Alpha, Incorporated®, Gamma Mu Omega Chapter. The purpose of A WISH, INC. is to provide life-enhancing programs and opportunities, as well as monetary assistance to women, children and families to acquire and sustain essential life skills.

Alpha Kappa Alpha Sorority, Incorporated® (AKA) is an international service organization that was founded on the campus of Howard University in Washington, D.C. in 1908. It is the oldest Greek-lettered organization established by African-American, college-educated, women.

Alpha Kappa Alpha is comprised of a nucleus of 300,000 members in graduate and undergraduate chapters in the United States, the U. S. Virgin Islands, the Caribbean, Canada, Japan, Germany, Korea, Dubai and on the continent of Africa.

Its membership is comprised of distinguished women who boast excellent academic records, proven leadership skills, and are involved in the global community through advocacy and service. Alpha Kappa Alpha has dedicated itself to improving the quality of life for citizens worldwide and promoting peace.

*Jennifer L. Thomas*

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Jennifer L. Thomas  
A WISH, INC. Chairman

A handwritten signature in black ink that reads "Vana Noel".

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Vana Noel  
President, Alpha Kappa Alpha, Sorority  
Incorporated®  
Gamma Mu Omega Chapter

## SCHOLARSHIP AWARD PROGRAM CRITERIA

- I. Eligibility Criteria for Scholarship Applicants - Students must:
- A. A graduating high school student from east Volusia County public high school who will attend a college or university. Those who participate in A WISH, INC. and Gamma Mu Omega sponsored programs are eligible to apply.
  - B. Submit an official school sealed transcript documenting your cumulative grade point average (CPGA) and class rank. You must, on the date of the application deadline date, and throughout your senior year, have maintained at least a 2.80 cumulative grade point average (on a 4.0 scale or its equivalent if other scale). *Failure to submit completed materials by the deadline date will result in disqualification.*
  - C. Submit at least two (2) letters of recommendation, preferably documenting active community service whether through school, church, organizations, or other affiliations. Relatives of the applicant may not submit recommendation letters. *Failure to submit completed materials by the deadline date will result in disqualification.*
  - D. Submit a completed Verification of Community Service form with your application package. Incomplete documentation including telephone numbers of a contact person to confirm community service will decrease scoring. Community service is a critical part of the ratings process. *Failure to submit completed materials by the deadline date will result in disqualification.*
  - E. Submit a completed Scholarship Application along with supporting materials and a 350-word-essay on the theme by the deadline date/time –there are no exceptions. The 2024 theme: **“Do you feel that Black History should continue to be taught in High School?”** *Failure to submit completed materials by the deadline date will result in disqualification.*
  - F. Attend and participate in the activity (virtually or in-person) honoring our scholarship recipients.
- II. The Scholarship Application, essay and all other required materials must be received on or before **Friday, April 26, 2024**. There are no exceptions. Applicants are encouraged to get their applications in early to avoid obstacles that might hinder timely submission of all data. Applicant shall submit all materials to:
- Herronda S. Mortimer, Chairman**  
**Scholarship Committee**  
**A WISH, Incorporated**  
**Post Office Box 10325, Daytona Beach, FL 32120**
- III. Scholarships will be awarded during student’s designated honors/awards ceremony.
- IV. Scholarship Award disbursements will be made to recipients upon documentation of their enrollment in a post-secondary educational institution by the date established by A WISH, Inc.

V. **Essay Guidelines for 2024**

- A. Submit a typed and double-spaced 350-word essay on 8 ½ x 11-inch un-ruled paper using 1 ½-inch margins and indented paragraphs. Footnotes, definitions, and bibliographies are not counted as part of the essay word count.
- B. There must be a cover page listing the title of your essay, date prepared, and name of your high school along with your name, address, and telephone number. The first page of the essay shall have the title as its heading followed by the theme, for example:

***2024 Scholarship Essay Theme/Title:***

**“Do you feel that Black History should continue to be taught in High School?”**

C. The essay should:

- 1. Be relevant to the theme.
- 2. Have a clear purpose and support the conclusions reached.
- 3. Be logical in its organization and development.
- 4. Use accurate grammar, punctuation, spelling, quotations, etc.
- 5. List the complete bibliography of books and other reference materials used to develop the essay at the end of the essay. When the use of terms, quotes, or factual information is used, a bibliography must be submitted. *Failure to submit completed materials by the deadline date will result in disqualification*

**NOTE: Failure to Adhere to the Above Essay Guidelines Will Result in Decreased Scoring.**

*For any questions: Please Contact Ms. Herronda Mortimer at [gmoscholarship@gmail.com](mailto:gmoscholarship@gmail.com)*



**A WISH, INC. ALPHA KAPPA ALPHA SORORITY, INCORPORATED®**  
**GAMMA MU OMEGA CHAPTER**  
**2024 General Scholarship Application**

P.O. BOX 10325  
Daytona Beach, FL 32120

**Due Date: Friday, April 26, 2024**

**PERSONAL DATA**

Full Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Current Address \_\_\_\_\_

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

Parent or Guardian Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Parent or Guardian Name \_\_\_\_\_

Phone Number \_\_\_\_\_

**EDUCATION**

Name of High School Attending \_\_\_\_\_

Name of Guidance Counselor: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**ACADEMICS**

Cumulative GPA: \_\_\_\_\_

Highest SAT Score: \_\_\_\_\_

Highest ACT Score \_\_\_\_\_

**EXTRA-CURRICULAR ACTIVITIES**

Directions: List any school related activities in which you have participated. (Please attach additional pages if necessary).

Activity	Description

**COMMUNITY SERVICE ACTIVITIES**

Directions: List any activities in which you have participated. These should be activities outside of the school setting i.e., church groups, volunteer organizations, etc. (Please attach a community service verification form).

Activity	Description

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**HONORS AND AWARDS**

Directions: List any academic honors/recognitions received:

Award/Recognition	Year Received

**WORK EXPERIENCE**

Place of Employment	Job Description	Date of Employment

**HIGHER EDUCATION GOALS**

Directions: List College/University that you plan to attend.

Name	Admission Status

## AGREEMENT AND SIGNATURE

By submitting this application, I affirm that the information contained is true and complete. I understand that if I am awarded a scholarship by A WISH, Inc, the scholarship award will be paid upon receipt of supporting documentation and proof of **enrollment** in a college or University. If I fail to enroll or submit documentation the scholarship award is **forfeited**.

Name (Printed):	
Signature:	
Date:	

## VERIFICATION OF COMMUNITY SERVICE FORM

NOTE: Form must be filled out completely and legibly, and submitted with your application and essay to be eligible for the Alpha Kappa Alpha Sorority, Inc., Gamma Mu Omega Chapter Scholarship. If you require additional space, please attach supplementary sheets in the same format.

Example:	ABC Nursing Home Dr. Joe Smith	1515 Main Street Read to Elderly	555-5555 10 Hours
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1.	_____	_____	_____
	Organization	Address	Phone Number
	_____	_____	_____
	Contact Person	Service Provided	Hours Logged
2.	_____	_____	_____
	Organization	Address	Phone Number
	_____	_____	_____
	Contact Person	Service Provided	Hours Logged
3.	_____	_____	_____
	Organization	Address	Phone Number
	_____	_____	_____
	Contact Person	Service Provided	Hours Logged
4.	_____	_____	_____
	Organization	Address	Phone Number
	_____	_____	_____
	Contact Person	Service Provided	Hours Logged
5.	_____	_____	_____
	Organization	Address	Phone Number
	_____	_____	_____
	Contact Person	Service Provided	Hours Logged
6.	_____	_____	_____
	Organization	Address	Phone Number
	_____	_____	_____
	Contact Person	Service Provided	Hours Logged