



Tucson-Sierra Vista Alumni Chapter  
KAPPA ALPHA PSI FRATERNITY INC  
**2024 Scholarship Application**

Tucson Alumni Chapter | P.O. Box 18990 | Tucson, AZ 85731

**THE SIDNEY LEE DAWSON SCHOLARSHIP**

**INTRODUCTION**

Brother Sidney Lee Dawson was a founding member of the Tucson-Sierra Vista Alumni Chapter. Brother Dawson passed away in September 2009. Brother Dawson left a legacy of high academic standards, commitment to community service, and a love of humanity. To honor his legacy, the Tucson-Sierra Vista Alumni Chapter of Kappa Alpha Psi Fraternity, Inc established the Sidney Lee Dawson Scholarship to assist high school seniors who have a passion to learn, a determination to succeed, and an eagerness to earn a college degree.

**Award**

- \$1,000.00

**ELIGIBILITY CRITERIA**

- High School Graduating Senior
- Kappa Alpha Psi Fraternity Inc Affiliates
- Minimum cumulative grade point average (GPA) of 2.75
- Accepted to an accredited College or University upon High School graduation.

**A complete application packet will include:**

- A typed application
- A photo (head shot) preferably shirt and tie.
- An official high school transcript
- A copy of the official college/university acceptance letter indicating admission date.
- Two reference letters affirming the applicant's character, involvement in the community and school activities, and ability to succeed in a college/university setting.
- 500 Word Essay (typed). Essay prompt is provided on page 6.

If interested in applying please complete all sections below, and email or mail it to the Tucson-Sierra Vista Alumni Chapter address found below. All applications must be postmarked by **May 3, 2024**. Late and/or incomplete application packets will not be considered.

**Mail Application to:** Tucson-Sierra Vista Alumni Chapter  
P.O. Box 18990  
Tucson, AZ 85731

**Email Application to:** [tsvakappamw2@gmail.com](mailto:tsvakappamw2@gmail.com)

If you have any questions, please contact the Scholarship Committee Chair, Mirum Washington-White at [tsvakappamw2@gmail.com](mailto:tsvakappamw2@gmail.com)



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**APPLICANT COVER SHEET**

**\*\*\* Attach this form to the front of your completed scholarship application. \*\*\***

Name Date  
Address  
City Zip Code Phone  
High School Overall GPA

**Scholarship Eligibility Requirements**

Senior attending a high school located in the service areas of the Tucson-Sierra Vista Alumni Chapter

Grade point average of 2.75 (based on a 4.0 scale)

Accepted to an accredited 4 year college or university for the 2023-2024 academic year. If awarded the scholarship, you must provide verification of enrollment.

Include information regarding financial need.

Participant in Kappa League/Guide Right Program

**Submit Completed Application to:**

Tucson-Sierra Vista Alumni Chapter  
Kappa Alpha Psi Fraternity, Inc.  
Attention: Scholarship Committee  
P.O. Box 18990  
Tucson, AZ 85731

***Access the official application online <http://tsvalumni.com/>***

This is a fillable PDF. For handwritten applications, please **PRINT** legibly in blue or black ink.

The essay portion must be typed (not handwritten) and attached to the application.

See essay requirements on page 6.



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## Scholarship Application Checklist

Use this checklist to make sure that you have submitted all the required materials to receive consideration for the scholarship. Incomplete applications will **not** be considered.

Your application **must** include the following documents:

Applicants cover sheet.

A completed application form (pages 4–7)

A parent/guardian's signature (pages 5 and 7)

Your signature at the end of the application (page 7)

Media Release and Photography Form (page 7)

An **official** high school transcript

A 500-word typed essay (please include applicant name and page # on each page)

Two Letters of recommendation from any of the following persons:

- High School Teacher
- High School Counselor
- High School Principal
- Community Leader
- Minister
- Organizational Sponsor
- Volunteer Coordinator
- Employer

Recommendations from family members in the categories above will not be accepted. It is suggested that you ask the people who are writing your recommendations to comment upon (1) the length of time they have known you; (2) your personal qualities, character, leadership abilities, and/or any special attributes.

The Letter of recommendation must be an original and should be limited to one side of a single sheet of 8.5" x 11" paper, typed, size 12 font, dated, and signed by the author.

**All Applications must be postmarked by May 3, 2024.**



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**Directions:** Provide all information requested below.

I. Applicant Information			
First Name	Middle Name	Last Name	Gender
Street Address			
City		State	Zip
Home Phone	Cell Phone	E-mail	
Date of Birth (Month/Day/Year)		Place of Birth (City and State)	
High School			
High School Attending		Grade	Overall GPA
Address	City	State	Zip
Anticipated College/University and Major			
Preferred College/University		Location (City and State)	
Intended Major/Field of Study		Intended Minor/Field of Study	
II. Parent/Guardian Information			
Name of Mother/Guardian			
Mother/Guardian's Address (if different from applicant's)		City	State Zip
Mother's Work Phone		Mother's Home/Cell Phone	
Mother's Occupation		Mother's Employer	
Name of Father/Guardian			
Father/Guardian's Address (if different from applicant's)		City	State Zip
Father's Work Phone		Father's Home/Cell Phone	
Father's Occupation		Father's Employer	

**All Applications must be postmarked by May 3, 2024.**



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### III. Financial Need

Check the box below that best describes your family's combined annual gross income. Income should include employment, SSI, FIA, alimony, child support, disability, etc. Proof of income may be required.

- |  |  |
|--|--|
| <input type="checkbox"/> \$0 --- \$14,999      | <input type="checkbox"/> \$50,000 --- \$74,999 |
| <input type="checkbox"/> \$15,000 --- \$29,999 | <input type="checkbox"/> \$75,000 --- \$99,999 |
| <input type="checkbox"/> \$30,000 --- \$49,999 | <input type="checkbox"/> \$100,000 or more     |

Number of Dependent Children in Family	Number of Dependent Children Currently Attending a College/University
--	---

**Signature of Parent/Guardian** **Date**

### IV. Honors and Awards (e.g., academic, athletic, community, and/or school awards)

Award	Source of Award	Reason(s) for Award
1.		
2.		
3.		
4.		
5.		

### V. Extra-Curricular/Community Service Activities (e.g., school, religious, social groups)

Name of Group/Activity	Grade (Check boxes that apply.)				Leadership Position(s) Held
	9	10	11	12	
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### VI. Work/Volunteer Experience

Employer/Organization	Dates of Employment/Service	Position Held
1.		
2.		
3.		
4.		
5.		
6.		



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## VII. Essay

Essay Prompt Question:

What does it mean to be a Servant Leader while pursuing your goals and career ambitions?

Essay Formatting:

Typed, MLA Format, 500 Word Maximum, 12pt Font (Times Roman) with 1-Inch Margins.

Please include applicant name and page # on each page>

If Selected:

Applicant(s) selected to receive the Scholarship will receive a complementary ticket (+1 guest) to attend the 2024 Day of Achievement Ceremony and be recognized by the men of the Tucson-Sierra Vista Alumni Chapter of KAPPA ALPHA PSI FRATERNITY, Incorporated. Additional tickets may be purchased until the event is sold out.



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I hereby certify that all the information provided in this application is accurate and current. I understand this application packet will be kept confidential, and all materials submitted become the final property of the Tucson-Sierra Vista Alumni Chapter of Kappa Alpha Psi Fraternity, Inc.

**Signature of Applicant**

**Date**

### VIII. Media Release and Photography Form

#### CONSENT TO PHOTOGRAPH

I (please print name) \_\_\_\_\_ voluntarily give permission for this applicants, (print student's name)

\_\_\_\_\_ to be photographed and videotaped. My signature gives consent to the use of this applicants likeness in any publication, educational material, advertising, news media, and World Wide Web materials that the Tucson-Sierra Vista Alumni Chapter may utilize and produce in regard to the Sidney Lee Dawson Scholarship. I understand and agree that such materials, including all digital images, and prints shall become and remain the sole property of the Tucson-Sierra Vista Alumni Chapter. I further understand and agree that these materials may be kept on file and used by the Tucson-Sierra Vista Alumni Chapter for potential future use. I agree to release the Tucson-Sierra Vista Alumni Chapter from all liability arising from or in connection with the taking, use, publication, or dissemination of such materials. Copies of these photos may be distributed to the parent upon request.

**Signature of Applicant's Parent or Guardian**

**Date**

