



Beauty Through Diversity Scholarship Registration Form 2019

Provided by Lambda Sigma Gamma Sorority, Incorporated

There will be a total of 3 recipients from three different regions (Northern CA, Central CA, Southern CA & AZ). Each winner shall receive \$500.

Here are some important things you need to know before completing this form:

By completing this application **YOU ARE NOT OBLIGATED TO JOIN** Lambda Sigma Gamma Sorority, Inc. Our multicultural organization values unity & higher education amongst women.

You must be *Female* and/or identify as a *Woman* who will be attending a 4-year university (In State or Out of State).

Meet the GPA requirement of 2.8 and above.

Must submit 2 letters of recommendation, attach file below from recommender (Teacher, Counselor, Mentor, Supervisor, or Manager).

Must complete a minimum of 10 hours of community service, you may volunteer with any organization(s) of your choice, and must attach a community service log below (Service Log template will be provided).

Must send a partial high school transcript with 1st semester senior year grades with application. Please submit an unofficial copy (pictures of transcripts will not be accepted).

If selected as a recipient you must provide proof of "University Acceptance Letter", once enrolled into classes you must submit "Proof of Enrollment" to email address: beautythroughdiversity.lsg@gmail.com

*Must submit an **OFFICIAL** High School Transcript after graduation.



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* Please have your school registrar's office send your final transcript to beautythroughdiversity.lsg@gmail.com

For any questions or concerns please email:

Director of Philanthropy Christina Lopez at nationalphilanthropy.lsg@gmail.com
or email the scholarship committee at beautythroughdiversity.lsg@gmail.com

Deadline to submit online application, letters of recommendation, partial high school transcript, and community service log is **SUNDAY, MARCH 17TH, 2019.**



1. Basic Information

Full Name: _____

Date of Birth: _____

Email: _____

Phone Number: _____

Address: _____

2. Education

Name of High School: _____

Address: _____

Expected Graduation Date: _____

Are you currently taking or have taken college courses for credit? _____

If so, what college have you studied at? _____



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3. Letters of Recommendation

All recommenders must include the following in their letter of recommendation: name, title, phone number, email, length of relationship with student and signature. *Please submit **two letters** of recommendation with your application.*



6. Survey

Was the form easy to understand? (Yes) or (No)

Rate the overall experience with the form: 1 2 3 4 5

What could make this form better? _____

How did you hear about this scholarship? _____

Please list the person or school that informed you about our scholarship:

**Your application will be reviewed once all necessary documents are received.
Please be sure to check your email and spam folder for any updates regarding
your application status.**

**If you're sure you have everything, please email all documents to
beautythroughdiversity.lsg@gmail.com.**

Thank you for taking the time to fill out the
Beauty Through Diversity Scholarship application!