Virginia Beach Pearls Foundation 1385 Fordham Dr., Ste 105 #140 Virginia Beach, VA 23464



Celestine Diggs Porter Scholarship

African American Female High School Seniors

\$1000 Scholarship Award 2019 Fall Semester

Apply by January 31, 2019

^{***}All scholarship recipients must attend the Tenacious Teens Tomorrow Leaders Gala held in March to be eligible to receive the scholarship for which they have been awarded. Two tickets are reserved for the scholarship recipient and one guest.

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Celestyne Diggs Porter High School Scholarship

This scholarship is named after Mrs. Celestyne Diggs Porter, a noted educator in Hampton Roads Virginia, who has devoted over sixty years to training teachers in the various public-school systems. She is respected and admired throughout the Hampton Roads area for her inspiration and dedication to struggling students.

The Virginia Beach Pearls Foundation will award this \$1000 scholarship to an African American female high school senior who plans to attend a college or university during the upcoming year.

All student evaluations will be evaluated on the following criteria:

- 1. Reside in Virginia Beach and attend a Virginia Beach Public School.
- 2. Scholastic Achievement
 - A minimum 3.0 GPA is required.
 - A sealed official high school transcript must be submitted with the application.
- 3. Letters of Recommendation
 - Two letters of recommendation from individuals with personal knowledge of the applicant's abilities must accompany the scholarship application.
 - One of the two recommendation letters must be from a high school teacher or counselor. Letters from relatives are NOT acceptable.
- 4. Typed essay (250 double spaced word minimum) describing the following:
 - Tell us about a teacher that made a positive impact in your life.
- 5. Interview
 - A video answering the following questions. Please email video to lgoscholars@gmail.com
 - What are your short term and long term educational goals?
 - o What are your career aspirations?
 - Can you tell us about how you have been involved in your community?
 - What person had the greatest impact on your decision to attend college and why?
 - What colleges have you applied to? What colleges have you been accepted to? What are your top three choices and why?
 - Why should the scholarship committee award you the Celestine Diggs Porter Scholarship?

Please note: The Virginia Beach Pearls Foundation must receive official notification from a college or university by the stated deadline regarding the scholarship recipient's enrollment status before the scholarship is officially awarded.

The Celestine Diggs Porter Scholarship African American Female High School Seniors

Application Form

Directions: Please complete all forms in the fillable application and return completed application materials (to include, letters of recommendation, official transcript and essay) to Virginia Beach Pearls Foundation Charitable Affiliate of Alpha Kappa Alpha Sorority, Incorporated®, Lambda Gamma Omega Chapter, Scholarship Committee, 1385 Fordham Dr., Ste 105 #140, Virginia Beach, VA 23464, by the specified deadline.

Student Name:	Parent Name:
Address:	
Home Phone:	Cell Phone:
Student Email:	Parent Email:
Grade Point Average (Cumulative 3.0 minimum	required):
Name of High School:	
Class Rank:	
List any honors you have received:	
List your current extracurricular activities:	
List the college you plan to attend:	
Have you been awarded any scholarships and if	so how much?
l hereby certify that all the information provide	ed in this application is true and accurate.
Signature of Applicant	-
senarare or wholicalit	Date

Virginia Beach Pearl Foundation

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Counselor

DATE: TO:

FROM:	Scholarship Committee		
SUBJECT:	Request for Transcript		
The graduating senior whose signature appears below has applied for the Celestine Diggs Porter scholarship given by the Virginia Beach Pearls Foundation Charitable Affiliate of Alpha Kappa Alpha Sorority Incorporated® Virginia Beach Chapter to a deserving African American female student who wishes to pursue an undergraduate degree. Applicants are required to submit proof of their high school education. Other criteria: grade point average, SAT/ACT scores, honors and activities.			
The record will be kept in strict confidence and used only to determine a recipient. The applicant has indicated by her signature below, approval of this request,			
Thank you for your cooperation.			
Applicant's name:			
Applicant's signature:			
Address:			
City/State/Zip:			
Phone:		Date:	

Applicant: Please ask your counselor to attach an official copy of your transcript to this form and forward to the address above: