

2018 Scholarship Application

Founded on July 26, 1922, in Atlanta, Georgia, the Order of the American Hellenic Educational Progressive Association (AHEPA) is the largest Greek-American association in the world. As the “E” in the middle of the AHEPA acronym suggests, education has been central to AHEPA’s mission throughout its history. During its early years, AHEPA promoted education in the English language and American history to assist Greek immigrants in obtaining citizenship. In recent years, AHEPA has promoted education through awarding scholarships. Over \$4 million is endowed at the local, district and national levels for scholarships, with a half million dollars awarded annually.

For nearly half a century, AHEPA Canton Chapter 59 has awarded scholarships amounting to tens of thousands of dollars to qualified students. These annual scholarships memorialize the achievements of Canton natives and longtime Ahepans, Anthony Manos and Pete Cazantzes, and honor the contributions to the community of Reverend Father Anthony Spirtos. During his tenure as president of Chapter 59, Anthony Manos (1921-1982) was one of the first to earmark funds for scholarships. Pete Cazantzes (1930-1993), a long-time teacher in the Canton City Schools, was a local advocate for young people and the value of education. Rev. Father Anthony Spirtos (1922-2009) has provided spiritual leadership in his adopted home of Canton for over fifteen years. These three members of the local chapter epitomize the best qualities of AHEPA.

Awards

In 2018, AHEPA Canton Chapter 59 will award scholarships to qualified applicants, with the largest single award not to exceed \$1,000. Payment will be made to the school of the recipient’s choice for the payment of tuition and fees. The number of scholarships awarded varies from year to year, dependent upon funding and the number of qualified applicants.

Eligibility Requirements

To receive an AHEPA Canton Chapter 59 scholarship, an applicant must fulfill all of the following requirements:

1. Be a member of the Canton AHEPA #59 family of organizations (AHEPA, Daughters, Maids, Sons) or have a parent(s) who have been active members of the Senior Orders for 3 consecutive years (2 years plus current year).
2. Be a high school graduate
3. Have a current cumulative grade point average (GPA) of at least 2.75
4. Be a full-time undergraduate in an accredited university, college, or technical school

Recipients of a 2018 scholarship from the Daughters of Penelope Canton Chapter 40 are not eligible for a 2018 AHEPA Canton Chapter 59 scholarship. If no applicant meets these requirements, no scholarships will be awarded. While students may reapply for this scholarship for all four years of undergraduate study, priority will be given to first-time applicants.

Order of the American Hellenic Educational Progressive Association
AHEPA Canton Chapter 59
2018 Scholarship Guidelines and Application

Selection Criteria

Scholarships will be awarded on the basis of the following (in alphabetical order):

1. Character
2. Demonstration of determination to complete her or his education
3. Financial need
4. Scholastic achievement
5. School, community, and church activities

Application

A complete application consists of four parts: any omission will result in disqualification.

1. Application form. Please note that there are separate application forms for Graduating High School Seniors (pages 3 & 4 of the attached application) and for Continuing College Students (pages 5 & 6).
2. Confidential Statement of Parent or Guardian (page 7 of the attached application).
3. **Official transcript of grades** from your educational institution (with an official seal or signed by an authorized school official).
4. Three (3) letters of recommendation. Letters from relatives of the applicant are NOT acceptable. One of your letters **must be from an educator** (note that triplicates of pages 8 & 9 of the application are for letters of recommendation).

Deadline

Completed applications must be mailed and **postmarked by Sunday, April 30, 2018**. Late or incomplete applications will NOT be considered. Mail or email applications to:

AHEPA #59 Scholarship Committee
c/o Dr. Nick Koinoglou
641 East State St
Alliance, Ohio 44601

OR

EMAIL TO:

ahepa59scholarshipfund@gmail.com

Awards will be announced by May 31, 2018. Applicants will be notified by mail of the results of the competition. Formal presentation of the awards will be made after notification. The applicant and/or family representative(s) is strongly encouraged to attend the award's dinner. If you have any questions or require further information, please contact Dr. Nick Koinoglou at 330-904-7393.

Order of the American Hellenic Educational Progressive Association
AHEPA Canton Chapter 59
2018 Scholarship Application for Graduating High School Seniors

1. Personal Information

Name _____
Last First Middle

Gender: Male () Female ()

Marital Status: Single () Married ()

Home Address _____
Street and Number

City _____ State _____ Zip Code _____

Telephone _____ E-mail _____

Date of Birth _____
Month Day Year

Birthplace _____
City or Town State or Province Country

2. Academic Information --- High School

High School(s) Attended _____
School Years
_____ *School Years*

Year of graduation _____ Grade Point Average _____

Test Scores: American College Test (ACT) _____

Scholastic Aptitude Test (SAT) _____

Course of Study _____

Scholarships, Honors, Recognition, Awards Received _____

What school do you plan to attend upon graduation? _____

What is your intended course of study? _____

What are your career goals and aspirations? _____

Order of the American Hellenic Educational Progressive Association
AHEPA Canton Chapter 59
2018 Scholarship Application for Graduating High School Seniors

3. Extracurricular Activities

Please list your school, community, and church activities. Use back or attachment if necessary. _____

4. Personal Statement

Please give a brief statement of why you are applying for this scholarship and why you are qualified. Use back or attachment if necessary.

5. AHEPA Scholarship Information

Have you ever applied for an AHEPA scholarship before? _____

If so, when? _____

Have you ever received an AHEPA scholarship? _____

If so, when? _____

Are you applying for a Daughters of Penelope scholarship this year? _____

Are you or any member of your family a member of the AHEPA family or organizations (AHEPA, Daughters of Penelope, Sons of Pericles, or Maids of Athena)?

| <i>Name</i> | <i>Organization</i> | <i>Relation to Applicant</i> |
|-------------|---------------------|------------------------------|
|-------------|---------------------|------------------------------|

I hereby declare that I have answered the above questions accurately to the best of my ability.

Signature _____

Date _____

Order of the American Hellenic Educational Progressive Association
AHEPA Canton Chapter 59
2018 Scholarship Application for Continuing College Students

1. Personal Information

Name _____
Last First Middle

Gender: Male () Female ()

Marital Status: Single () Married ()

Home Address _____
Street and Number

City _____ State _____ Zip Code _____

Telephone _____ E-mail _____

Date of Birth _____
Month Day Year

Birthplace _____
City or Town State or Province Country

2. Academic Information --- College

High School Attended _____
School Years

Year of Graduation _____ Grade Point Average _____

College(s) Attended _____
School Years

School Years

Course of Study _____

Credit hours or Courses completed _____

Credit hours or Courses needed for graduation _____

Scholarships, Honors, Recognition, Awards received _____

What are your career goals and aspirations? _____

Order of the American Hellenic Educational Progressive Association
AHEPA Canton Chapter 59
2018 Scholarship Application

3. Extracurricular Activities

Please list your school, community, and church activities. Use back or attachment if necessary. _____

4. Personal Statement

Please give a brief statement of why you are applying for this scholarship and why you are qualified. Use back or attachment if necessary.

5. AHEPA Scholarship Information

Have you ever applied for an AHEPA scholarship before? _____

If so, when? _____

Have you ever received an AHEPA scholarship? _____

If so, when? _____

Are you applying for a Daughters of Penelope scholarship this year? _____

Are you or any member of your family a member of the AHEPA family or organizations (AHEPA, Daughters of Penelope, Sons of Pericles, or Maids of Athena)?

| <i>Name</i> | <i>Organization</i> | <i>Relation to Applicant</i> |
|-------------|---------------------|------------------------------|
|-------------|---------------------|------------------------------|

I hereby declare that I have answered the above questions accurately to the best of my ability.

Signature _____

Date _____

Order of the American Hellenic Educational Progressive Association
AHEPA Canton Chapter 59
2018 Scholarship Application

Confidential Statement of Parent or Guardian

Name _____
Last First Middle

Home Address _____
Street and Number

City _____ State _____ Zip Code _____

Telephone _____ E-mail _____

Occupation _____

Your Place of Employment _____
Name

_____ *Address*

Your Spouse's Place of Employment _____
Name

_____ *Address*

Are you retired? _____ If so, when? _____

Number of children _____ Number of children residing at home _____

Number and description of other dependents _____

Number of children in school _____ Where enrolled? _____

Combined family income: Please initial:
Under \$50,000 _____ Over \$50,000 _____

I hereby declare that I have answered the above questions accurately to the best of my ability.

Signature _____

Date _____

Order of the American Hellenic Educational Progressive Association
AHEPA Canton Chapter 59
2018 Scholarship Application

Applicant Letter of Recommendation

for _____
Name of Applicant

to attend _____
Name of Applicant's intended school

Yours is one of three letters of recommendation for the 2018 AHEPA Canton Chapter 59 scholarship. Scholarships will be awarded on the basis of the following five criteria (listed in alphabetical order): character, demonstration of determination to complete her or his education, financial need, scholastic achievement, and school, community, and church activities. This letter of recommendation is a critical component of the student's application.

The application deadline is April 30, 2018. Please complete this form and return it to the applicant in a sealed envelope as soon as possible. Incomplete applications will not be considered. Thank you for your time and care in completing this form.

Order of AHEPA
Canton Chapter 59 Scholarship Committee

Name _____
Last First Middle

Home Address _____
Street and Number

City _____ State _____ Zip Code _____

Telephone _____ E-Mail _____

Occupation _____

How long and in what capacity have you known the applicant? _____

Please evaluate the applicant's chances of completing her or his degree. _____

**Order of the American Hellenic Educational Progressive Association
AHEPA Canton Chapter 59
2018 Scholarship Application**

Applicant Letter of Recommendation

| | Superior | Excellent | Good | Average | Fair |
|------------|----------|-----------|-------|---------|-------|
| Intellect | _____ | _____ | _____ | _____ | _____ |
| Creativity | _____ | _____ | _____ | _____ | _____ |
| Work Ethic | _____ | _____ | _____ | _____ | _____ |
| Integrity | _____ | _____ | _____ | _____ | _____ |
| Leadership | _____ | _____ | _____ | _____ | _____ |

Please provide any additional information on the applicant, her or his career goals, and her or his chances of achieving those goals. Use back or attachment if necessary.

Signature _____

Date _____