



**Zeta Phi Beta Sorority, Inc.
Chi Lambda Zeta Chapter
P.O.BOX 34025
Bartlett, TN 38184-0025**

To: Interested Applicants

From: Linda De Vastey, Scholarship Chair

Subject: Sonja Crumble Finer Womanhood Scholarship Application

Zeta Phi Beta Sorority, Incorporated, Chi Lambda Zeta Chapter, will award academic scholarships to selected 2024 graduating seniors. Interested graduating seniors must have been accepted into a four-year college or university for the Fall 2024 semester.

The Sonja Crumble Finer Womanhood Scholarship is named in honor of an extraordinary sorority sister, Ms. Sonja Crumble, who was a Charter Member of the Chi Lambda Zeta Chapter, as well as an esteemed educator for over 20 years. Ms. Crumble was employed by the legacy Memphis City Schools district and the Unified Shelby County Schools district. She had the privilege and opportunity to work with a group of diverse students during her educational career.

Ms. Crumble worked tirelessly and touched many minds throughout the Shelby County community through her teachings at Keystone Elementary, La Rose Elementary, Grandview Heights and Jackson Elementary. She served as an active member and representative at many capacities for the National Education Association, Tennessee Education Association and Memphis Education Association. Student achievement and educational reform were two of her top priorities. In 2012, Ms. Crumble was selected by her colleagues as the Prestige Teacher of the Year at Grandview Heights Elementary.

The Sonja Crumble Finer Womanhood Scholarship is a competitive academic scholarship awarded in the amount of \$1000.00. The recipient must currently attend a public, charter, private, or parochial high school within Shelby County. This is a one-time scholarship and will be distributed to the selected recipient during the Fall 2024 semester, upon proof of enrollment in a four-year college or university.

Applicants should review the attached information and ensure all requirements have been addressed. ***All application materials must be returned to the Chi Lambda Zeta Chapter of Zeta Phi Beta Sorority Incorporated and postmarked or emailed by the deadline, Sunday, March 17, 2024, at 11:59 pm CST to be considered.***

Thank you for your interest in our scholarship program.

Sincerely,

Linda De Vastey, Scholarship Chair
Contact Number: 901.351.2488/ Email Address: CLZScholarship@gmail.com

Chi Lambda Zeta Chapter - P.O. Box 34025 - Bartlett, TN 38184-0025



Zeta Phi Beta Sorority, Inc.

Chi Lambda Zeta Chapter

Bartlett, TN

2024

Sonja Crumble

Finer Womanhood

Scholarship Application

APPLICATIONS MUST BE POSTMARKED OR EMAILED BY SUNDAY, MARCH 17, 2024, AT 11:59 PM CST

Incomplete applications will not be accepted.

REQUIREMENTS:

1. Applicants must be a U.S. citizen and a resident of Shelby County, TN. Applicants must attend a public, charter, private, or parochial school within Shelby County TN. Applicants must be a graduating high school senior with a minimum **3.0 cumulative GPA**.
2. Applicants must provide his or her most recent (fall 2023) official high school transcript as well as two letters of recommendation. The transcript must be sealed or electronically submitted by the high school to the email address listed below. One letter should be from a teacher or guidance counselor and one letter from a community leader (i.e., coach, church leader, or mentor). Letters are to be written by non-relatives. The letters of recommendation **MUST** be written on the “**RECOMMENDATION FORM**” attached in this application. Recommendation form may be photocopied.
3. Applicants must be accepted into a four-year institution of higher learning. **Proof of acceptance** such as an **acceptance letter** must be submitted with the applicant’s scholarship application. Before funds are dispensed to a recipient, **proof of enrollment** such as a class schedule and student ID number must be submitted.
4. Applicants must provide a professional photo or senior head photograph. **No selfies** or cell phone pictures will be accepted.
5. Two of our founding principles are scholarship and service. Write at least a one page (max of two pages) 12-point Times New Roman double-spaced essay that examines **student achievement and the need for education reform**. Use appropriate grammar and punctuation in communicating your response. In lieu of a written essay, a video of the applicant presenting an oral presentation discussing the above topic may be submitted. The video must be of high quality, sound, and presented in a professional manner. Video submissions should be no longer than three minutes. Power Point, iMovie, or YouTube may be used to create the oral presentation. Tik Tok, Snapchat, or any other type of social media reels are unacceptable.
6. Completed applications **MUST** be postmarked or emailed by **11:59 pm CST on Sunday, March 17, 2024**.
7. The Sonja Crumble Finer Womanhood Scholarship Committee will review all applications and all recipients will be notified no later than **Saturday, April 20, 2024**. The presentation of the awards will be determined at a later date.
8. **Applications for the *Sonja Crumble Finer Womanhood Scholarship* should be mailed or emailed to:**

**Chi Lambda Zeta Chapter Scholarship Committee
P.O. BOX 34025
Bartlett, TN 38184**

CLZScholarship@gmail.com

Incomplete applications will not be accepted.



Sonja Crumble
Finer Womanhood
Scholarship Application
(Please Type or Print Legibly)

Applicant's Name: _____

Applicant's Address: _____

City: _____ State: _____ Zip: _____

Applicant's Cell Phone Number: _____ Alternate Phone Number: _____

Applicant's Email Address: _____

Name of Parent(s)/Guardian(s) Phone Number(s) and Email: _____

Applicant's High School: _____

High School Address: _____

City: _____ State: _____ Zip: _____

High School Phone number: _____

High School Graduation Date: _____

Class Rank: _____ of _____ GPA: _____

Name of anticipated College or University: _____

Extra-Curricular/Community Activities: _____

Employment Experience: _____

List any honors and awards that you have received: _____

What are your career aspirations? What steps have you taken so far to achieve your chosen career goal?

What is your definition of success?

Will you receive any other financial assistance such as grants, scholarships, etc.? _____

Signature of School Counselor: _____ Date: _____

Signature of Applicant: _____ Date: _____

Sonja Crumble Finer Womanhood Scholarship

PLEASE USE THIS FORM ONLY.

DO NOT ATTACH ADDITIONAL LETTERS.

Form may be photocopied.
RECOMMENDATION FORM

Name of Applicant: _____

Name of Reference: _____

Title: _____

Address: _____

Telephone: _____ Fax: _____ Email: _____

How long have you known the scholarship applicant? _____

In what capacity are you familiar with the applicant's education and/or personal background?

EVALUATION

Please rate the applicant in the following areas with a (✓):

Characteristics	Superior	Above Average	Average	Below Average
Qualities of leadership				
Ability to plan and organize				
Interpersonal skills when working with peers				
Dependability/completion of assignments				
Motivation and initiative				

COMMENTS

Please use the rest of this form to comment on any aspect of the applicant's background, experiences, community involvement, etc., that you feel will help the Scholarship Committee evaluate this individual.

Signature: _____ Date: _____

Form may be photocopied.

Application and Recommendation Form Deadline: Sunday, March 17, 2024.



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