



Zeta Phi Beta Sorority, Incorporated Beta
Nu Zeta Chapter Zeta Amicae of Greensboro

Barbara L. Herring Zeta Amicae Scholarship

Zeta Amicae of Greensboro presents the Barbara Herring Zeta Amicae Scholarship. This \$500 scholarship will be awarded to a young lady who demonstrates outstanding character and drive to succeed.

The application requirements for the scholarship are as followed:

- o A graduating senior from a Guilford County high school planning to attend a 2-year college or vocational program in Guilford County
- o 2.5 cumulative GPA
- o At least 100 hours of documented community service hours
- o A letter of recommendation from a teacher or community leader
- o A high school resume
- o A 300-word essay explaining how the scholarship would impact her life

Please include your name, number, address, and intended educational program on your

essay. All application materials must be submitted via email by March 31, 2025. Submit to

ZAGSOScholarship@gmail.com.



INFORMATION:

Name: _____

Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

Home: Telephone: (____) _____

Parent(s) or Legal Guardian with whom you live: (type full name)

School Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

School Telephone: (____) _____

PERSONAL INFORMATION:

Date of Birth: _____

Social Security Number: _____

How many brothers and sisters do you have? _____ Number in college _____

COLLEGE INFORMATION:

Indicate the major you intend to pursue or pursuing in college: _____

List the colleges to which you have applied for or attending:

GRADE POINT

AVERAGE: 9th _____ 10th _____ 11th _____ 12th _____

SCHOLASTIC APTITUDE TEST I AND II TEST SCORES:

SAT I			SAT II		
Year	Verbal Score	Math Score	Year	Test	Score
Taken			Taken	Name	
20_____	_____	_____	_____	_____	_____
20_____	_____	_____	_____	_____	_____
20_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

APPLICATION CERTIFICATION (FOR ZETA AMICAE SCHOLARSHIP)

IMPORTANT: Review this form and make certain you have responded accurately to all items.

Signatures required below.

APPLICANT: I certify that all statements made in this application are true, complete, and correct to the best of my knowledge.

*Signature*_____ *Date*_____

PARENT: I have reviewed the application and the statements are true, complete, and correct to the best of my knowledge.

*Signature*_____ *Date*_____

GUIDANCE COUNSELOR: I have reviewed the applicant's responses and certify that they are correct, insofar as the official school records indicate.

*Signature*_____ *Date*_____