



Top Ladies of Distinction, Inc.

AREA V

Scholarship Application Tips

The following recommendations are given to assist Top Teens in their preparation of the Scholarship application.

1. Please remember to complete the application neatly and fully. The judges will consider only completed applications received by the stated deadline. If information is being submitted under separate cover, please indicate it on your application. All information required must be **postmarked by the deadline date of: March 15, 2019.**
2. Remember to review your application prior to submitting it for consideration. Make sure you are responsive to the questions as asked on the application. **Do not submit essays on topics other than the one listed under Scholarship Essay Guidelines.**
3. If your high school does not use the standard grading system, please have your guidance counselor attach a conversion scale to your transcript.
4. **Each application must be signed by the Top Teen Advisor.** This serves to verify that the Top Teen is in “good standing” with his/her chapter.
5. **Please do not forget to include the official chapter name on your application.**
6. **YOU MUST WRITE ON ONE OF THE DESIGNATED ESSAY TOPICS.**

TOP LADIES OF DISTINCTION, INC.

Area V Scholarship Committee

Lady Patricia Bethel

Lady Claudia Lee

“Invest in V.A.L.U.E.S. that Support, Enhance, and Sustain”



**TOP LADIES OF DISTINCTION, INC.
AREA V**

**SCHOLARSHIP REQUIREMENTS
FOR
GRADUATING TOP TEENS**

1. A member of Top Teens of America for 2 years
2. Have met all financial obligations with Top Teen Chapter
3. An active Top Teen in good standings with local chapter
4. A Graduating Senior
5. **Minimum 3.0 g.p.a. for Academic Scholarship**; Minimum 2.0 g.p.a. for **Community College/Technical Scholarship**
6. Must submit most recent high school transcript

SCHOLARSHIP ESSAY GUIDELINES

1. A **minimum** 250 word essay on the topic: “My Commitment to Service in Challenging Times” OR “Describe your TTA involvement, your financial need, why you desire to attend college, and how this scholarship could help assist you in preparation for your future educational career. **(The second topic is the National Scholarship topic)**
2. **TYPED** on - 8.5 x 11 inch white paper
3. Double spaced between each line
4. Leave one inch margins on left, right, top and bottom of each page.
5. Three spaces between TITLE and first paragraph
6. Five space paragraph indention
7. **DO NOT** type your name on the essay pages. Each essay will be given a number for Judging purposes only

ITEMS NEEDED TO APPLY

- Scholarship Application
 - a. typed / printed neatly
- Typed Essay
- **High school transcript with minimum 3.0 GPA for Academic; 2.0 GPA for Technical/Community**
- Letters of recommendations (2)
 - a. One from a Top Lady
 - b. One from a High School Counselor, Teacher, or Principal

All of the above must be postmarked on or before March 15, 2019

Please submit (BY U.S. MAIL ONLY) to:

LADY PATRICIA BETHEL
TLOD AREA V SCHOLARSHIP CHAIRPERSON
7739 BLACKBURN CT.

REYNOLDSBURG, OH 43068



TO: Graduating Seniors - Members of Top Teens of America

FROM: Lady Patricia Bethel, Scholarship Chairperson
Top Ladies of Distinction, Inc., AREA V

SUBJECT: Top Ladies of Distinction, Inc., AREA V
College Scholarship Application - REVISED

DATE: January 25, 2019

Dear Top Teens:

Enclosed please find all information necessary for you to apply for the **Area V Top Ladies of Distinction, Inc., College Scholarship**. The winners of these scholarships will be announced at our 44th Annual Leadership Conference, to be held in Indianapolis, IN, **April 3-7, 2019**.

Please follow all guidelines. For more information you may contact:

Lady Patricia Bethel (614) 863-8798 Phone & Fax
E-mail: pbethel67@gmail.com (that is 67 following bethel)

Much Success!

Lady Patricia Bethel, Scholarship Chairperson
TLOD, Area V



**TOP LADIES OF DISTINCTION, INC.
COLLEGE SCHOLARSHIP FOR AREA V
TOP TEENS OF AMERICA - 2019
APPLICATION FORM**

Fill in completely by typing or printing clearly and return to your Top Teen Advisor

MEMBER OF _____ CHAPTER APPLICATION FOR: ACADEMIC _____ COMMUNITY _____
COLLEGE PREFERENCE

Application For: Fall _____ Spring _____ Summer _____ Year 20 _____

FULL NAME _____
Last First Middle

SOCIAL SECURITY NUMBER _____ CELL NUMBER (____) _____

ADDRESS _____ EMAIL _____

CITY _____ COUNTY _____ STATE _____ ZIP CODE _____

DATE OF BIRTH _____
Month Day Year Age Sex Place of Birth: City & State

PARENT/ GUARDIAN _____ PHONE NUMBER (____) _____

ADDRESS _____ RELATIONSHIP _____

HIGH SCHOOL ATTENDED _____ CLASS RANK _____ in _____ GRADUATES

S.A.T. or A.C.T. SCORES _____ HIGH SCHOOL GRADE POINT AVERAGE _____

WILL YOU BE A GRADUATE OF A HIGH SCHOOL WITH MINIMUM OF 16 UNITS OF WORK? YES _____ NO _____

HOW LONG HAVE YOU BEEN A TOP TEEN? _____ LIST TTA INVOLVEMENT _____

LIST ANY SCHOOL AND/OR COMMUNITY INVOLVEMENT. WHAT ROLE DID YOU PLAY? _____

LIST ANY HONORS RECEIVED _____

LIST JOBS YOU HAVE HAD - PART-TIME OR SUMMER _____

LIST TWO PEOPLE: (Names and Addresses) not related who will submit recommendations for you as to your needs, character and etc. One recommendation **MUST** be from a Top Lady and one from a counselor, teacher or principal.

A. NAME _____

ADDRESS _____

B. NAME _____

ADDRESS _____

Applicant's Signature

Top Teens Advisor Signature

DO NOT WRITE BELOW THIS LINE

ACTION TAKEN _____ ACCEPTED () DENIED () CANCELLED ()

DATE _____
Month Year

COMMENTS _____

DATE REQUESTED _____ DATED RECEIVED _____

Signature of TLOD Scholarship Chairperson

Date

ESSAY NUMBER _____