



an equal opportunity institution

# Delta Chi Scholarship 2017-2018

Application deadline: March 1, 2017

Award

- Amount varies

Eligibility

- Incoming Freshman, full-time students currently enrolled at UMKC, and transfer students
- Preference to affiliates of Delta Chi Fraternity through membership, relative or referral by an alumnus (letter of support required)
- U.S. citizen or permanent resident
- Enroll full-time at UMKC
- Leadership and community involvement
- 3.0 cumulative grade point average

To apply for this award submit:

- A completed application, making certain that it is legible and can be duplicated (*ink only*)
- A typewritten essay explaining your career and educational goals (approximately one page in length)
- A copy of your high school transcript **sent with this application** if you are an incoming Freshman student
- A copy of your college transcript **sent with this application** if you are transferring from another institution
- If you are currently attending UMKC, no transcript is required

Univ. of Missouri-Kansas City  
 Financial Aid and Scholarships  
 Office  
 101 Administrative Center  
 5100 Rockhill Road  
 Kansas City, MO 64110-2499

Phone: 816-235-1154  
 Fax: 816-235-5511  
 E-mail: [finaid@umkc.edu](mailto:finaid@umkc.edu)

Those with speech or hearing  
 impairments may use  
 Relay Missouri  
 1-800-735-2966 (TT) or  
 1-800-735-2466 (Voice)

Name \_\_\_\_\_ UMKC Id# \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City/State/Zip \_\_\_\_\_

E-mail \_\_\_\_\_

List major school and community activities, awards, honors or offices held (continue on another sheet if necessary):

ACTIVITY \_\_\_\_\_ HONOR/AWARD/OFFICE \_\_\_\_\_ DATE \_\_\_\_\_

List all work experience, including hours per week worked during school. Include any volunteer work:

EMPLOYER/VOLUNTEER SITE \_\_\_\_\_ HOURS PER WEEK \_\_\_\_\_ DATE \_\_\_\_\_

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I give permission for the Financial Aid and Scholarships Office at the University of Missouri-Kansas City to release my official transcript to outside parties who are considering me for scholarship opportunities.

I certify that all of the information that I have provided on this application is true and accurate to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Submit all materials to :  
UMKC FINANCIAL AID AND SCHOLARSHIPS OFFICE  
101 ADMINISTRATIVE CENTER  
5100 ROCKHILL RD  
KANSAS CITY, MO 64110-2499