



Letter to Previous Scholarship Recipients – First Year College Student Applicants

Dear Former Scholarship Recipient:

Southern Prince George's County Community Charities (SPGCCC), Inc. awards one-time renewable awards to former recipients of its academic scholarships during their second year of college. SPGCCC, Inc. is the 501 (c)(3) organization working in partnership with the Upsilon Tau Omega chapter of Alpha Kappa Alpha Sorority, Incorporated in Fort Washington, Maryland. As a former recipient of an academic scholarship from SPGCCC, Inc., you are eligible for a one-time renewable award to assist with academic textbooks for your continuing education. The minimum renewable award will be based on the availability of funds.

In order to receive the one-time renewable award, you must be currently enrolled in college and planning to continue your studies during the upcoming academic school year. To initiate the process to receive your one-time renewable scholarship, please submit the attached application no later than **MAY 3, 2024**.

QUESTIONS:

Please contact **Robin Crawley**, Scholarship Committee Chairman, via e-mail at scholarship.spgccc@gmail.com. All applicants will be notified within 4 weeks following the application deadline. All funds will be mailed directly to the college/university of attendance.

Thank you in advance for your interest and cooperation.

Sincerely,

Quindella Fletcher
President
Southern Prince George's County Community Charities, Inc.

Quindella Fletcher
President
Alpha Kappa Alpha Sorority Inc.®
Upsilon Tau Omega Chapter

P.O. Box 44178 Fort Washington, Maryland 20749



SPGCCC Inc. One-Time Renewable Award Application

PART I (TO BE COMPLETED BY STUDENT)

Name: _____
 Last **First** **Middle**

Student ID#: _____ Overall GPA: _____

Date Entered College: _____ Current Classification: _____ Declared Major: _____

College/University Attending: _____

Student Telephone # _____ Alternate # _____ Email _____

PART II (TO BE COMPLETED BY COLLEGE/UNIVERSITY FINANCIAL AID OFFICE)

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I certify that _____ is currently enrolled at _____. Our records indicate that the student intends to continue their studies during the upcoming academic school year.

Scholarship funds should be mailed to the following address:

 City **State** **Zip Code**

Signature of Person Completing Form: _____

Printed Name of Person Completing Form: _____

Title: _____ Phone Number: _____

ALL REQUESTED INFORMATION MUST BE SUBMITTED ELECTRONICALLY TO:

scholarship.spgccc@gmail.com