

Alpha Kappa Alpha Sorority, Inc.  
Psi Theta Omega Chapter - Metro Orlando



*Blooming in June*  
DEBUTANTE COTERIE

BLOOMING IN JUNE DEBUTANTE COTERIE

APPLICATION PACKET

2016-2017



Alpha Kappa Alpha Sorority, Inc.  
Psi Theta Omega Chapter - Metro Orlando  
P. O. Box 560542  
Orlando, FL 32856

[www.metroorlandoaka.org](http://www.metroorlandoaka.org)



## Blooming in June Debutante Coterie Eligibility Requirements

All Tea Rose participants must meet the minimum eligibility requirements listed below in order to participate as a part of the Blooming in June Coterie and Cotillion.

All applicants must (be):

- Currently enrolled as a senior in an Orange, Osceola, Seminole or surrounding county high schools
- Be of good character and reputation
- Hold a minimum cumulative academic average of at least 2.0 GPA
- Plan to attend a post-secondary institution/school within one year of high school graduation
- Complete Blooming in June Debutante Coterie Application
- Provide a 250-300 word personal statement detailing what you hope to learn/accomplish by participating in this program as well as how you will work to improve your community
- Provide a personal biography to include at a minimum your name, your high school, your attending church (if applicable), your activities, a quote that you live by, your five favorite things, and your hopes for the future.
- Provide an official transcript
- Provide three (3) letters of recommendation from non-family members
- Sign, along with parent(s) or legal guardian(s), the Participant Commitment Statement and Certification Forms
- Complete a personal interview with the Blooming in June Debutante Coterie Selection Committee
- Pay a non-refundable participant fee of \$350.00 (Payment plans are available with your first (of three) installment of \$150.00 being due by Sunday, June 25, 2017. Subsequent payments are due as follows: Friday, July 21, 2017, \$100; Friday, September 29 2017, \$100.00.

Please submit all of the application components in the same envelope. Incomplete and/or late applications will not be considered.

To be considered, **applications must be postmarked by no later than Friday, May 19, 2017.**

Mail Completed Applications to:  
Alpha Kappa Alpha Sorority, Inc., Psi Theta Omega Chapter Attn: Blooming in June  
Debutante Coterie Selection Committee P. O. Box 560542  
Orlando, FL 32856



BLOOMING IN JUNE DEBUTANTE COTERIE APPLICATION

APPLICANT INFORMATION

Name: -----

Home Address: -----

City: ----- State: ----- Zip Code: -----

Date of Birth: ----- Home Phone: ( ) -----

Cell Phone: ( ) ----- Alternate Phone: ( ) -----

Email Address: -----

PARENT/GUARDIAN INFORMATION

Mother/Guardian Name: -----

Home Address: -----  
(If Different from Above)

City: ----- State: ----- Zip Code: -----

Home Phone: ( ) ----- Cell Phone: ( ) -----

Email Address: -----

Father/Guardian Name: -----

Home Address: -----  
(If Different from Above)

City: ----- State: ----- Zip Code: -----

Home Phone: ( ) ----- Cell Phone: ( ) -----

Email Address: -----

**ACADEMIC/ COMMUNITY INFORMATION**

Name of High School: -----

City: ----- State: ----- Zip Code: -----

Name of Guidance Counselor: -----

Anticipated Date of Graduation: ----- GPA: -----/-----

List your academic achievements, honors, and accomplishments:

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-----  
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-----  
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List your extracurricular activities and any offices held:

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List your civic, church, service, and volunteer activities and any offices held:

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List your talents, hobbies, and special interests:

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-----  
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## EMPLOYMENT HISTORY

You might include activities such as babysitting or tutoring if you received payment.

Name of Company----- Position Held: -----

Dates of Employment:----- Supervisor's Name: -----

Brief Description of Duties: -----  
-----  
-----

Name of Company----- Position Held: -----

Dates of Employment:----- Supervisor's Name: -----

Brief Description of Duties: -----  
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## EDUCATIONAL AND CAREER GOALS

Tell us about your educational and career goals. -----  
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-----  
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## SPECIAL ACCOMMODATIONS

Do you have any special needs that we need to be aware of if selected? YES  NO

If yes, please describe: -----

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## PERSONAL STATEMENT

Your application must include a 250 – 300-word essay on the writing prompt below. Your essay should not exceed two pages, and should be typed, double-spaced, 12 font, with 1" margins.

- **Situation:** As a participant of the Blooming in June Debutante Coterie, you will have the opportunity to plan, organize, and execute community service activities. Participants will also take part in various cultural activities and events.
- **Directions:** Think about what it means to work in the community and take part in cultural activities and events. How does this help the community?
- **Prompt:** Write to explain how being a member of the Blooming in June Debutante Coterie will benefit you, and how you will work to improve your community.

## LETTERS OF RECOMMENDATION

Applications must include Three (3) Recommendation Forms. (These forms are included in the application packet.) Recommendations must come from a member of your school's faculty; i.e. teacher, guidance counselor, administrator, a civic, religious leader, of previous employer; i.e. pastor, youth ministry leader, girl scout leader, etc. The person completing the recommendation must not be related to you.

Please be sure to return the recommendation forms in a sealed envelope and return them along with your application. Recommendation forms are not to be returned separately.

## T-SHIRT SIZE

Circle One. XS S M L XL 1X 2XX 3XXX

## APPLICATION CHECKLIST

All applications must be completed in their entirety to be reviewed and considered. Applications must be typed or printed legibly in blue or black ink. Before submitting your application, be sure that the following items in the checklist below have been enclosed.

- ONE (1) Original COMPLETED APPLICATION PACKAGE
- ONE (1) Required typed ESSAY/PERSONAL STATEMENT
- ONE (1) Required typed PERSONAL BIOGRAPHY
- ONE (1) Official (sealed) TRANSCRIPT
- THREE (3) Sealed RECOMMENDATION FORMS/LETTERS
- ONE (1) Signed Participation Certification Form
- ONE (1) Mentoring Program Parent Release Form and Questionnaire

### PLEASE NOTE:

Those applicants meeting the established criteria will be required to participate in a panel interview to be conducted by the Blooming in June Debutante Coterie Selection Committee. **Notifications for panel interviews will be made no later than Friday, June 2, 2017.**

**Psi Theta Omega reserves the right to eliminate any incomplete, unsigned, late or illegible application.**

## PARTICIPANT COMMITMENT STATEMENT

I affirm that all statements made in this application and any accompanying documents are accurate and complete to the best of my knowledge. If selected, I agree to participate in at least 80% of all "Blooming in June" Debutante Coterie related activities, which include but are not limited to meetings, workshops, community service, fundraising, dance rehearsals and any other activities deemed necessary. I assert that I will exemplify exceptional academic and moral behavior to include demonstrating the attributes of empathy, courage, fortitude, ethics, and honesty (Please note that any substantiated incidents of bullying or fighting will be immediate grounds for dismissal from the program) during the program. I affirm that I will exhaust every effort required to reach academic, participative, community service and financial requirements by the established deadlines. I understand that I may be removed from the program for misrepresenting myself or not meeting any of the above criteria or for reasons explained throughout the course of my participation at the discretion of the Psi Theta Omega Blooming in June Debutante Coterie Committee.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
PRINTED NAME

### Important Dates To Remember

- ✓ **Program Information Sessions** are scheduled for Saturday, April 22nd at 11:00 a.m. at **OR** Sunday, May 7th at 4:00 p.m. Both sessions will be held at The Mall of Millenia Community Room (4200 Conroy Road Orlando, FL 32839). **Only one session is required to attend** by the candidate and her parent(s).
- ✓ **Applications** should be mailed and postmarked by no later than Friday, May 19, 2017.
- ✓ **Panel Interviews** are tentatively scheduled for the week of June 5-9, 2017. Time and Location TBD

## Recommendation Form

Please provide three (3) recommendations from non-family members.

**Debutante/Applicant Name:** \_\_\_\_\_

**How long have you known the applicant?** \_\_\_\_\_

**In what capacity have you known her?** \_\_\_\_\_

**Please rate; using the number scale, which best applies to each area for the potential debutante:**

	Outstanding (5)	Above Avg. (4)	Average (3)	Below Average (2)	Poor (1)	Can Not Rate (0)
<b>Accountability</b> Accepts responsibility for her decisions and for the consequences of her actions and the things she says.						
<b>Citizenship</b> Abides by the laws and rules of society. She is socially conscious and participates in public service (volunteerism).						
<b>Diversity</b> Accepts the differences in everyone, treats them equally and keeps an open mind.						
<b>Excellence in Academia</b> Concerned with the quality of work she produces. She is diligent, reliable and committed to doing her absolute best.						
<b>Honesty/Integrity</b> She is truthful and sincere in words and actions. Honorable and upright, stands by her beliefs and principles.						
<b>Respect</b> Pride in herself (self-respect), demonstrates a high regard for her peers and authority figures.						
<b>Character</b> She is reliable, kind and compassionate, capable of taking the blame, able to persevere, modest and humble, and can control anger.						

**What else would you like us to know about the potential debutante?**

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**Thank you for taking the time to show your support for the potential debutante. Please place this form in a sealed envelope, sign the flap, and return the envelope to the applicant to be mailed with her application.**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Date**