

**The Five Pearls Foundation of Columbus Georgia, Inc.  
And  
Epsilon Eta Zeta Chapter  
Of  
Zeta Phi Beta Sorority  
Scholarship Application**

**Eligibility Criteria:** To be eligible for this scholarship the applicant must:

- 1. Possess a minimum GPA of 2.75**
- 2. Be accepted to a 2 or 4 year college or university (attach a copy of acceptance letter)**
- 3. Submit completed application packet to the sorority by April 10, 2026**

Name \_\_\_\_\_  
Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

**Address** \_\_\_\_\_

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<b>No. &amp; Street</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
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**Parent(s) or Guardian  
Name** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **Age** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_  
**Email Address** \_\_\_\_\_  
**High School Currently Attending** \_\_\_\_\_

**College or University you plan to attend:**

**Please respond to the following statements and attach your answers to this application. Responses must be typed.**

1. Describe your involvement in your school. Include any special recognition(s) received.
2. Describe your involvement in the community/church. Include any special Recognition (s) you have received.
3. State the area of interest you plan to pursue in college. Explain why you have chosen this area as a college major and how you hope to apply it after graduation.
4. Please include two (2) letters of recommendations from teachers or counselor.
5. Please attach a senior photograph.

High School Grade Point Average \_\_\_\_\_  
High School Class Rank \_\_\_\_\_ out of \_\_\_\_\_  
Counselor's \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Applications must be returned by Friday, April 10, 2026. Please forward requested information to:

**Mrs. Olivia Rutledge  
1019 Leaf Brook Drive  
Midland, GA 31820-5501**

**Questions ???**

**(706) 536-9256  
[rutledgeolivia@aol.com](mailto:rutledgeolivia@aol.com)**