

Alpha Kappa Alpha Sorority, Inc.®
Beta Lambda Omega Chapter
GRAVES/WRIGHT SCHOLARSHIP
P.O. Box 385 Bluefield, WV 24701

Alpha Kappa Alpha Sorority, Inc.®, Beta Lambda Omega Chapter is looking for a deserving high school senior to receive our GRAVES/WRIGHT SCHOLARSHIP to be presented at the end of the 2025-2026 school term.

Alpha Kappa Alpha Sorority, Inc.® is a service-oriented organization, founded in 1908 on the campus of Howard University by 9 Black Women to uplift the lives of college women and girls.

Our scholarship has been named in memory and honor of Frances Graves and Harriett Wright, two members who advocated for and encouraged young adults to do their best. The \$500 scholarship will be awarded to a deserving high school senior (male or female) who meets the following criteria:

Eligibility and Guidelines:

- 1. A 2026 graduating senior from Mercer, McDowell, or Tazwell counties.**
- 2. A grade point average of 2.5 or higher.**
- 3. A double-spaced typed essay of no less than 500 words that answers the following question: “Please share how a woman (personally known or a public figure) has encouraged you, uplifted you, and/or challenged you to become a better person and how you hope to contribute your talents to a better, more inclusive society.”**
- 4. A letter of recommendation from a nonfamily member.**
- 5. The completed scholarship application, verified by a senior guidance counselor.**

If you are interested in applying for the Graves/Wright Scholarship, you must complete and return the attached verified application, along with your letter of recommendation, and the short essay. If further information is needed, please contact Mrs. Ruth Hairston at (304) 436-4845. The applications must be verified by the guidance counselor and postmarked no later than Wednesday, March 18, 2026.

We prefer that you share your own thoughts and experiences rather than AI generated content.

Thank you in advance for your application and may God continue to bless you!

Sincerely,

The Ladies of Alpha Kappa Alpha Sorority, Inc.®, Beta Lambda Omega Chapter.

**GRAVES/WRIGHT SCHOLARSHIP
APPLICATION**

Date: _____

Name: _____

Address: _____

Telephone: _____

Email: _____

Parents: _____

Address: (If Different) _____

Grade Point Average: _____

School(s) Attended: _____

Extra-Curricular Activities: _____

Awards: _____

Community Service Activities: _____

College or University you plan to attend: _____

Student's Signature: _____ **Date:** _____

Verification: _____ **Date:** _____

(School Counselor's Signature)