



2026
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Ivy Foundation of Hampton, Inc.

A Foundation Established by Gamma Upsilon Omega Chapter of
Alpha Kappa Alpha Sorority, Incorporated®

March 1, 2026

To Prospective Academic Scholarship Applicants:

The Ivy Foundation of Hampton, Inc. is a nonprofit 501(c)(3) organization established in 2005 by members of the Alpha Kappa Alpha Sorority, Incorporated®, Gamma Upsilon Omega Chapter to expand service to the community. Like the Gamma Upsilon Omega Chapter, which has served the Hampton Roads area for over 81 years, the Foundation is committed to enhancing the lives of those in need in our community.

The Foundation provides funding for scholarships and programs focused on health, education, economics, the arts, and family support, and contributes to initiatives addressing hunger, poverty, disaster relief, shelter, and health improvement.

In keeping with this tradition, the Gamma Upsilon Omega Chapter of Alpha Kappa Alpha Sorority, Incorporated® and The Ivy Foundation of Hampton, Incorporated, supports the academic efforts of student(s) by awarding a **\$1,500.00 scholarship award, to eligible undergraduate students**. Our scholarship targets students who have demonstrated exceptional commitment to service throughout their respective university/college, the community, and various aspects of academic achievement. The selection process is also sensitive to a student with a financial need.

To ensure that your application is considered, you must complete and submit the completed application packet as outlined in the ***Eligibility Criteria Letter*** by the April 15, 2026, deadline date for consideration by the Scholarship Committee.

Sincerely,

Dr. Crystal B. Taylor, President
Ivy Foundation of Hampton, Inc.

Ms. Alyssa Boone, President
Alpha Kappa Alpha Sorority, Incorporated®
Gamma Upsilon Omega Chapter

Ivy Foundation of Hampton, Inc.
and
Gamma Upsilon Omega Chapter of Alpha Kappa Alpha Sorority, Incorporated®

Margaret LaFairet Brown Smith, Mae Barbee Pleasant and Doris Curry Parks
Continuing Education Scholarship Application Guidelines

PURPOSE

To award scholarships to undergraduate students who have completed at least one (1) year in an accredited degree granting institution within the United States, graduated from a Hampton (Virginia) City Public School, are planning to continue their program of education and can demonstrate academic excellence, community service and financial need.

ELIGIBILITY CRITERIA

- *College student classified as a sophomore, junior, or senior.*
- *Enrolled full-time in a four-, five- or six-year program at a four-year college.*
- *Have a cumulative grade point average of 3.0 or higher.*
- *Graduated from a Hampton (VA) City Public School (Bethel, Hampton, Kecoughtan, or Phoebus High School).*

SCHOLARSHIP APPLICATION PACKET REQUIREMENTS

1. A signed scholarship application. The application must be typed (New Times Roman font – 12 inch).
2. An **official** university/college transcript.
3. ***A formal “head shot” photograph that focuses ONLY upon your face.*** Please note a photograph release form should be completed and formally signed by you.
4. **Proof** of attendance at a Hampton City High School.
5. A typed ***five (5) page*** essay describing professional objectives, personal and academic goals and how your chosen major will help achieve your goals.
Discuss the importance of service to your community and cite service-related projects that you currently participate in. (Double-spaced, 12-inch font, Times New Roman).
6. Three (3) **signed** letters of recommendation, two from your advisor and/or professor(s) and one personal reference. The recommendation letters must be typed. (New Times Roman – 12 inch).
7. **Documented** proof of service participation in volunteer/community/church and school activities.

AWARD AMOUNT

A \$1,500.00 award will be sent directly to the institution where the student is enrolled.

DEADLINE:

Completed applications and all supporting documents must be submitted no later than April 15, 2026. Upload completed application and documents to: <https://forms.gle/5BMNyuuCCc4Q3iTA9>

Work Experience Dates of Employment _____

Family Information:

Parent/Guardian Name(s) and Relationship

Occupation(s)

Employer(s)

Parent/Guardian Name(s) and Relationship

__ Occupation(s)

Employer(s)

Total Family Taxable Income (as indicated on Federal Income Tax forms): _____ \$0 – \$24,999

_____ \$25,000 – \$49,999 _____ \$50,000 – \$74,999

_____ \$75,000– \$99,999 _____ \$100,000 and above

List all children and/or dependents in your household:

Name Age School

Please indicate any unusual expenses or financial burdens presently faced by your family that you feel the committee needs to know (Please use an attachment if needed):

__ Have you received other scholarships? __ YES __ NO

If so, what is the approximate amount? \$ _____

List the scholarships that you have already submitted an application for and/or you plan on applying for. _____

PHOTOGRAPH: Include a formal “head shot” photograph that focuses upon your face. Please note the photograph release form is included within this application and should be completed and signed.

I certify that all of the information included in this packet is factual and true and that the essay

submitted is the original work of this applicant. Any information that has been falsified or misrepresented may result in the withdrawal of my application from the selection process and forfeiture of the scholarship.

Applicant's Signature: _____ **Date:** _____

NAME OF YOUR ENROLLED UNIVERSITY/COLLEGE

DEADLINE: Completed applications and all supporting documents and photograph must be submitted no later than April 15, 2026. Upload the completed application packet to:
<https://forms.gle/5BMNyuCCc4Q3iTA9>

**Ivy Foundation of Hampton, Inc.
and
Gamma Upsilon Omega Chapter of Alpha Kappa Alpha Sorority, Incorporated®**

**PUBLIC RELATIONS COMMITTEE
PHOTOGRAPHIC CONSENT, PERMISSION, AND RELEASE FORM
*(Please read carefully before signing)***

I hereby grant permission to the above-named organization to use my photograph/likeness in its newsletters, magazine, newspaper publications, website or in printed publications. I also acknowledge that the above-named organization reserves the right to discontinue use of my photograph with or without notice. It is hereby noted that I understand and agree that all photographic images and/or likenesses will become the property of the Alpha Kappa Alpha Sorority, Incorporated® - Gamma Upsilon Chapter and Ivy Foundation of Hampton, Inc. and used and/or shared at their discretion.

Please note the parent/guardian signature for photographic consent IS NOT required if the student is over the age of twenty-one (21).

STUDENT NAME (Print): _____

STUDENT SIGNATURE: _____

PARENT/GUARDIAN NAME (Print) _____

PARENT/GUARDIAN NAME (Print) _____

PARENT/ GUARDIAN SIGNATURE _____

PARENT/ GUARDIAN SIGNATURE _____

DATE: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____