

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



*Blooming in June*  
DEBUTANTE COTERIE

BLOOMING IN JUNE DEBUTANTE COTERIE  
APPLICATION PACKET  
2010-2011



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)



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

## 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 junior in an Orange County high school
- 15-17 Years of age on or before November 12, 2009
- Be of good character and reputation
- Hold a minimum academic average of 3.0 cumulative or 3.0 weighted 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 essay
- 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
- Sign, along with parent(s) or legal guardian(s), the Participation Certification Form
- Complete a personal interview with the Blooming in June Debutante Coterie Selection Committee
- Pay a non-refundable participant fee of \$550.00. (*Payment plans are available*)

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* on or before **Monday, January 11, 2010**.  
**Applicants selected for an interview will be notified by Monday, January 18, 2010. Final candidate announcements will be made by Friday, January 29, 2010.**

*Mail 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

*If you have any questions, please contact Farah L. Henderson via email at:  
[tearose@metroorlandoaka.org](mailto:tearose@metroorlandoaka.org)*



DEBUTANTE COTERIE

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

**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: \_\_\_\_/\_\_\_\_(3.5/4.0)

**List your academic achievements, honors and accomplishments:**

---

---

---

---

---

---

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

---

---

---

---

---

---

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

---

---

---

---

**List your talents, hobbies, and special interests:**

---

---

---

---

**EMPLOYMENT HISTORY**

*You may 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: \_\_\_\_\_

---

---

**EDUCATIONAL AND CAREER GOALS**

**Tell us about your educational and career goals.** \_\_\_\_\_

---

---

---



## 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) Official (sealed) TRANSCRIPT
- ✓ ONE (1) Required typed ESSAY
- ✓ THREE (3) Sealed RECOMMENDATION FORMS

### 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 and will be notified on or before Monday, January 11, 2010.

*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 all "Blooming in June" Debutante Coterie related activities, which include but are not limited to meetings, rehearsals, workshops, community service, fundraising and all other activities deemed required. I assert that I will exemplify exceptional academic and moral behavior during the course of the program. I affirm that I will exhaust every effort required to reach academic, participative, community service and financial requirements by the deadlines set. 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

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE

To be considered, application packets must be *postmarked* on or before **January 11, 2010**

**Mail to:**

**Alpha Kappa Alpha Sorority, Inc.  
Psi Theta Omega Chapter – Metro Orlando  
Attn: Blooming in June Debutante Coterie Selection Committee  
P. O. Box 560542  
Orlando, FL 32856**

*If you have any questions, please contact Farah L. Henderson via email at:  
[tearose@metroorlandoaka.org](mailto:tearose@metroorlandoaka.org)*

**Alpha Kappa Alpha Sorority, Incorporated  
Psi Theta Omega Chapter – Metro Orlando**

**Blooming in June Debutante Coterie**

**Participation Certification**

It is the expectation of Alpha Kappa Alpha Sorority, Inc., Psi Theta Omega Chapter that participants in the Blooming in June Debutante Coterie adhere to the tenets of high ethical standards, moral behavior and those attributes that are uplifting in mind, body and spirit. She shall refrain from inappropriate use of the social networks, i.e., Facebook, MySpace, etc.

Alpha Kappa Alpha Sorority, Inc., Psi Theta Omega Chapter retains the right to exercise exclusive control, regarding the participation of any applicant in the Blooming in June Debutante Coterie by: declining an applicant's participation; withdrawing the privilege of participation; and by further declining any participant's participation in the Debutante Cotillion.

Each participant is requested to certify and affirm the truthfulness of each of the following statements by initialing each blank and signing at the bottom of this certification.

\_\_\_ I am neither married, nor have I ever been married, nor will I become married prior to the date of the Blooming in June Debutante Cotillion 2011

\_\_\_ I am not pregnant, neither have I ever given birth to a child, nor will I become pregnant prior to the date of the Blooming in June Debutante Cotillion 2011.

\_\_\_ I am not currently the subject of an arrest.

\_\_\_ I have neither been charged, nor convicted of a criminal violation, nor have I ever been the subject of any prior criminal violation, or any other violation of a rule or policy that reflects poor moral character.

\_\_\_ I will not use illegal drugs or alcohol while participating in Blooming in June Debutante Coterie activities.

\_\_\_ I am neither the subject of a pending suspension or expulsion, nor have I ever been suspended or expelled from any school for any reason.

\_\_\_ In the event of a change of circumstance after the date of this certification regarding any matter contained herein, I will immediately and forthrightly notify the Chapter President of the details of any such matter, with the full understanding that the Chapter retains the exclusive right, at any time, to decline my participation for failure to adhere to all participation criteria.

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

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

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

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

\_\_\_\_\_  
*DATE*

\_\_\_\_\_  
*DATE*