



**Alpha Phi Alpha Fraternity, Inc.,  
Theta Upsilon Lambda Chapter  
PO Box 13035  
Fort Wayne, IN 46866-3035**

December 21, 2011

Alpha Phi Alpha Fraternity, Inc.  
Theta Upsilon Lambda Chapter Beautillion Program

*Developing Character,  
Pursuing Academic Excellence, and Service to the Community  
on the Journey from Boyhood to Manhood*

*Dear Parents and Students:*

My name is Corey Brown and I represent the brothers of Theta Upsilon Lambda Chapter of Alpha Phi Alpha Fraternity, Inc., we are in process of identifying those young men who may be interested in participating in our Bi- Annual Scholarship Beautillion planned for April 2012.

Another purpose is to give scholarships and create a pool of college students that have been directly affected by the Alpha Phi Alpha Fraternity, Inc. The scholarship awards will be presented to those individuals who have committed themselves to the bi-monthly sessions and have successfully completed the process.

An application and information packet has been included with this correspondence. There will be a parent orientation meeting tentatively scheduled for late October. For additional information, please contact me at 260-450-0987 or via email at [tca444@aol.com](mailto:tca444@aol.com). You may also contact me through mail at the address listed below.

**Alpha Phi Alpha Fraternity, Inc.  
Theta Upsilon Lambda Chapter Beautillion Program  
PO Box 13035  
Fort Wayne, IN 46866-3035  
C/O Corey Brown**

Sincerely,  
*Corey Brown - Chair*

Theta Upsilon Lambda Chapter of Alpha Phi Alpha Fraternity, Inc.



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Alpha Phi Alpha Fraternity, Inc.

Theta Upsilon Lambda Chapter Beautillion Program

Beautillion Motto:

Developing Character, Pursuing Academic Excellence, and Service to the Community...on the Journey from Boyhood to Manhood

Purpose:

The purpose of the Beautillion is to teach African American young men the social graces and the necessary skills required for success in life, and transition into adulthood. Theta Upsilon Lambda will host a bi-annual beautillion for high school junior or senior men from around the Fort Wayne and the surrounding area. The ultimate purpose of this experience is to create a holistic student.

Another purpose is to give scholarships and create a pool of college students that have been directly affected by the Alpha Phi Alpha Fraternity, Inc. The scholarship awards will be presented to those individuals who have committed themselves to the bi-monthly sessions and have successfully completed the process.

Program Criteria

To be considered for admittance into the program, applicants must have demonstrated leadership potential (i.e., academic, athletic, religious, etc.). The applicants will also have a thorough interview with the Beautillion Committee members reviewing their interest in public service and social and political change. All applicants must meet the minimum GPA requirement of 2.5 on a 4.0 scale.

Program Scheduling

Students will meet for two Saturdays of each month for 2 - 3 hours. It may be necessary to schedule additional sessions during the week to augment the program or to provide an opportunity for the young men to take advantage of all available cultural and educational opportunities; including mandatory participation in a beautillion retreat.

The expectation is that all Beaus will attend the scheduled seminars in order to be eligible for the Beau of the Year and top scholarship awards.

For additional information, please contact Corey Brown at 260-450-0987 or via email at tca444@aol.com.



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**Beautillion Program Application**

(Please print legibly)

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ GPA \_\_\_\_\_

Email address: \_\_\_\_\_

Parents'/Guardians' Names: \_\_\_\_\_

Address: (if different) \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Parents' email address: \_\_\_\_\_

School Activities \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Hobbies & Talents

\_\_\_\_\_

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Organizational Involvement (community, church)

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Honors & Awards

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What do you feel you would gain from being in the 2012 Beautillion program? Please provide your answer in the format of a short essay of 250-300 words.

Applicant's Signature

\_\_\_\_\_ Date \_\_\_\_\_

(By signing, you verify this information is truthful and complete)



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**Beautillion Recommendation Form (part 1)**

(For Teacher, Principal, or Counselor)

The following student is seeking to be a participant in the Theta Upsilon Lambda's Beautillion Program for 2012. Please complete the following information and return to the applicant in a sealed envelope with your signature.

Applicant's Name (Print) \_\_\_\_\_

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

In what capacity have you known the applicant? \_\_\_\_\_

Based on your knowledge of the applicant, please complete below using the following scale:

(4) Outstanding, (3) Good, (2) Fair, (1) Poor

Intellectual Ability \_\_\_\_\_

Leadership \_\_\_\_\_

Creativity and Imagination \_\_\_\_\_

Maturity and Judgment \_\_\_\_\_

Motivation and Initiative \_\_\_\_\_

Personal Integrity \_\_\_\_\_

Ability to get along with peers \_\_\_\_\_

Self-assuredness \_\_\_\_\_



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**Beautillion Recommendation Form (part 2)**

(For Teacher, Principal, or Counselor)

Please use the space below to make additional comments (A separate sheet may be attached)

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Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (Print) \_\_\_\_\_ Title \_\_\_\_\_

School \_\_\_\_\_

Phone \_\_\_\_\_



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Beautillion Program

**Participation Agreement for Prospective Beau (part 1)**

I, \_\_\_\_\_ (Print name), certify that the information provided in this application is complete, true, and accurate. I authorize the Theta Upsilon Lambda Chapter of Alpha Phi Alpha Fraternity, Inc, Beautillion chair and selection committee to verify any information provided in this application.

I understand that falsification of any information in this application will result in my dismissal from the Beautillion program and that any money received from me or on my behalf will NOT be refunded.

Additionally, I authorize the use of photos and biographical information for the promotion and marketing of this event.

I further understand that if I voluntarily withdraw from the Beautillion program any money received from me or on my behalf will NOT be refunded.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



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Beautillion Program

**Participation Agreement for Prospective Beau (part 2)**

I, \_\_\_\_\_ (Print name), legal parent or guardian of

\_\_\_\_\_ (Print applicant's name), certify that the information provided in this application is complete, true and accurate. I authorize the Theta Upsilon Lambda Chapter of Alpha Phi Alpha, Inc. Beautillion chair and Selection Committee to verify any information provided in this application.

I understand that falsification of any information in this application will result in my child's dismissal from the Beautillion Program and that any money received on their behalf will NOT be refunded. I further understand that if my child voluntarily withdraws from the Beautillion Program any money received from them or on their behalf will NOT be refunded.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**APPLICATION DEADLINE- POSTMARKED BY**

January 20, 2012