



**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. 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.



**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 _____

Hobbies & Talents



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Organizational Involvement (community, church)

Honors & Awards

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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Theta Upsilon Lambda Chapter Beautillion Program

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)

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