

# AWARDS GUIDELINES

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Individuals nominated must be financial with their on the local chapter, State, and regional levels and with International Headquarters during the previous calendar year.

The content submitted in the award package must cover the calendar year of January 1, 2024, through December 31, 2024.

All forms must have all required signatures to qualify for the submitted award. Failure to do so will result in disqualification of candidate or chapter.

All award submissions must include the following supporting documents, if applicable:

- Award Nomination Form (Mandatory)
- Typed nomination letter (Item A) (Mandatory)
  - Letter must be well presented with logo, date, etc., and not exceed one page
  - Introduce nominee's (individual or chapter) short biography/history
  - Describe nominee's (individual or chapter) accomplishment(s) as it relates to the respective award
  - Describe nominee's (individual or chapter) impact with his/its community/campus as it relates to the respective award.
- Supporting document(s) from a school or community official (If Applicable)
- Supporting document(s) from non-Greek school organization, and/or business/organization. (If Applicable)
- Supporting document(s) from another Greek-lettered organization. (If Applicable)

**All entries must be emailed or mailed to the addresses listed below. If mailed, mail must be postmarked by February 13, 2025. Entries received after the deadline will NOT be judged. THERE WILL BE NO EXCEPTIONS.** Please retain a copy for your records.

The point of contact for questions will be Brother JaDon Whipple, State Director of Collegiate Affairs at (912) 239-7217

Please email form to [georgiasigmas@gmail.com](mailto:georgiasigmas@gmail.com)

*Emailed submissions should be scanned only. You will receive a confirmation email when received. IF YOU DO NOT, please contact Bro. Kelvin Bryant to confirm receipt*

# AWARDS CATEGORIES

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Here are the awards that brothers and chapters are eligible for. Each award will be judged by a committee.

## Collegiate Hall of Fame

The following awards will be based upon one of the following Categories:

- Joseph A. Franklin Athletic Award
- Leonard Francis Morse, Sr. Leadership Award
- Dr. Ivorite Lorimer Scruggs Education Award

## Chapter Report of the Year... Collegiate/Alumni Chapter

Chapter reports are to be submitted in accordance with International Headquarter guidelines and will be judge by committee with same guidelines.

## Chapter of the Year... Collegiate/Alumni Chapter

This award is presented to a collegiate and alumni chapter whose total program best exemplifies the ideals of Phi Beta Sigma Fraternity, Inc. Chapters must have submitted a chapter report prior to nomination. The schools' Registrar must verify collegiate chapter's GPA.

## Outstanding Community Service Award

This award is given to an individual collegiate brother who has a personal commitment to uplifting his community through unique and effective community service. The nominee must show his commitment to community service by submission of a minimum, two-page narrative (including pictures) of his participation and active involvement in serve events. Each chapter may nominate only one brother for this award.

## Chapter Website/Social Media of the Year

This award is presented to the collegiate chapter with the website and social media accounts that best exemplifies the ideals of Phi Beta Sigma Fraternity and showcases the chapter in a creative and positive light.

## Collegiate Chapter Advisor of the Year

This award recognizes an Advisor who has gone above and beyond the call of duty in supporting the collegiate chapter's efforts in growth and success on both the campus and in the community.

## Sigma Beta Club of the Year (Parlette L. Moore Award)

This award is presented to the club whose total program and actives best exemplify the ideals of The Rise and Thunder Curriculum adopted by the National Sigma Beta Club Foundation. The nomination package must include verification that the club is registered with the IHQ. Additional criterion includes the cumulative GPA of the club (verified by the schools' principal or designee). The sponsoring chapter must submit nominations.

## Sigma Beta Club Advisor of the Year (The Village Keeper Award)

This award recognizes an Advisor who has gone above and beyond the call of duty in supporting their respective Sigma Beta Club. This advisor has shown exceptional mentorship and a dedication to the well-being of the future of the youth. He is committed to the "Village" and dedicated to the cause of building strong men.

### **Outstanding Collegiate/Alumni Bigger and Better Business Program**

This award recognizes the best such program implemented by an active chapter of the State. A nomination package is not required, as the recipient will be selected by committee from among the various chapter reports.

### **Outstanding Collegiate/Alumni Social Action Program**

This award recognizes the best such program implemented by an active chapter of the State. A nomination package is not required, as the recipient will be selected by committee from among the various chapter reports.

### **Outstanding Collegiate/Alumni Education Program**

This award recognizes the best such program implemented by an active chapter of the State. A nomination package is not required, as the recipient will be selected by committee from among the various chapter reports.

Programming awards will be considered through PIA submittal forms. Please submit the PIA submittal packet that you submitted to IHQ for the event you want to be considered. Each chapter may submit more than one event to be considered, HOWEVER only one event will be chosen for the award. Please scan and email your submittal with your:

- Chapter Name
- School name
- The category of the national program the event falls under
- Put in the subject line "Program Award Submittal"
- Attach proof of PIA Submittal
- Attach Pictures

#### **Submit events to:**

##### BIGGER AND BETTER BUSINESS:

Brother Devon Cangé ([bbb@georgiasigmas.org](mailto:bbb@georgiasigmas.org))

##### SOCIAL ACTION:

Brother Ucal Palmer ([socialaction@georgiasigmas.org](mailto:socialaction@georgiasigmas.org))

##### EDUCATION:

Brother Corey Sapp ([education@georgiasigmas.org](mailto:education@georgiasigmas.org))

##### SIGMA BETA CLUB:

Brother Kenneth Ford ([sigmabetaclubs@georgiasigmas.org](mailto:sigmabetaclubs@georgiasigmas.org))

Please CC all submissions and documents to [georgiasigmas@gmail.com](mailto:georgiasigmas@gmail.com).

#### **The Roswell O. Sutton Award**

This award will be presented to the State of Georgia's Executive Board member who has gone above and beyond the call of duty in his work for the members of the State of Georgia. THE STATE DIRECTOR WILL CHOOSE THIS AWARD.

#### **Graduation/New Members Scroll**

Although not an award, each chapter is encouraged to submit a graduation school AND names of newly initiated Neophyte brothers.

# COLLEGIATE HALL OF FAME

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## Category (Please Choose Only One Per Form)

Joseph A. Franklin Athletic Award  
Leonard Francis Morse, Sr. Leadership Award  
Dr. Ivorite Lorimer Scruggs Education Award

Nominee's Name: \_\_\_\_\_ Membership Number: \_\_\_\_\_

Address: \_\_\_\_\_

Number and Street Name or P.O. Box

\_\_\_\_\_ Apt No.

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Major: \_\_\_\_\_ Classification: \_\_\_\_\_ GPA: \_\_\_\_\_

## Chapter Information

Chapter Name: \_\_\_\_\_

Chapter Address: \_\_\_\_\_

Number and Street Name or P.O. Box

\_\_\_\_\_ Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

College/University: \_\_\_\_\_

College/University Address: \_\_\_\_\_

Number and Street Name

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

President's Printed Name: \_\_\_\_\_ Secretary's Printed Name: \_\_\_\_\_

President's Signature: \_\_\_\_\_ Secretary's Signature: \_\_\_\_\_

Advising Graduate Chapter Name: \_\_\_\_\_

Chapter Advisor's Signature: \_\_\_\_\_

*Use one form for each nomination. All award guidelines apply. Submit all supporting documentation and letters as listed in the guidelines. Newspaper articles, pictures, and other supporting testimonies may be included with this form. Please include verification of GPA from school's Registrars' Office.*

# CHAPTER REPORT OF THE YEAR

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Status: **Alumni** **Collegiate**

## Chapter Information

Chapter Name: \_\_\_\_\_

Chapter Address: \_\_\_\_\_

Number and Street Name or P.O. Box

\_\_\_\_\_

Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

College/University: \_\_\_\_\_

College/University Address: \_\_\_\_\_

Number and Street Name

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

President's Printed Name: \_\_\_\_\_ Secretary's Printed Name: \_\_\_\_\_

President's Signature: \_\_\_\_\_ Secretary's Signature: \_\_\_\_\_

Chapter Advisor's Name/Graduate Chapter Name (If Collegiate) \_\_\_\_\_

Number and Street Name or P.O. Box

\_\_\_\_\_

Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Chapter Advisor's Signature (If Collegiate) \_\_\_\_\_

*Use one form for each nomination. ALL award guidelines apply. Submit this form ONLY if you want your chapter report to be considered for the award. Pictures and other supporting documents must be included with this form (Proof of PIA). Please ensure that chapter reports are uploaded to the BluPrint database.*

# CHAPTER OF THE YEAR

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Status: **Alumni** **Collegiate**

## Chapter Information

Chapter Name: \_\_\_\_\_

Chapter Address: \_\_\_\_\_

Number and Street Name or P.O. Box

\_\_\_\_\_

Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

College/University: \_\_\_\_\_

College/University Address: \_\_\_\_\_

Number and Street Name

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

President's Printed Name: \_\_\_\_\_ Secretary's Printed Name: \_\_\_\_\_

President's Signature: \_\_\_\_\_ Secretary's Signature: \_\_\_\_\_

Chapter Advisor's Name/Graduate Chapter Name (If Collegiate) \_\_\_\_\_

Number and Street Name or P.O. Box

\_\_\_\_\_

Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Chapter Advisor's Signature (If Collegiate) \_\_\_\_\_

*Use one form for each nomination. ALL award guidelines apply. Submit this form ONLY if you want your chapter report to be considered for the award. Pictures and other supporting documents must be included with this form (Proof of PIA).*

# OUTSTANDING COMMUNITY SERVICE OF THE YEAR

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Nominee's Name: \_\_\_\_\_ Member ID No: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Major: \_\_\_\_\_ Classification: \_\_\_\_\_ GPA: \_\_\_\_\_

## Chapter Information

Chapter Name: \_\_\_\_\_

Chapter Address: \_\_\_\_\_  
Number and Street Name or P.O. Box

\_\_\_\_\_ Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

College/University: \_\_\_\_\_

College/University Address: \_\_\_\_\_  
Number and Street Name

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

President's Printed Name: \_\_\_\_\_ Secretary's Printed Name: \_\_\_\_\_

President's Signature: \_\_\_\_\_ Secretary's Signature: \_\_\_\_\_

Advising Graduate Chapter Name: \_\_\_\_\_

Chapter Advisor's Signature: \_\_\_\_\_

**\*\* TWO PAGE NARRATIVE SUPPORTING THE NOMINATION IS REQUIRED \*\***

*All award guidelines apply. Submit all supporting documentation and letters as listed in the guidelines. Newspaper articles, pictures, and other supporting testimonies may be included with this form. Please include verification of GPA from schools Registrars' Office.*

# CHAPTER WEBSITE AND SOCIAL MEDIA OF THE YEAR

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Chapter Name: \_\_\_\_\_

Chapter Address: \_\_\_\_\_  
Number and Street Name or P.O. Box

\_\_\_\_\_ Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Chapter's Website Address: \_\_\_\_\_

Chapter's Facebook Page: \_\_\_\_\_

Chapter's Twitter: \_\_\_\_\_

Chapter's Instagram: \_\_\_\_\_

President's Printed Name: \_\_\_\_\_ Secretary's Printed Name: \_\_\_\_\_

President's Signature: \_\_\_\_\_ Secretary's Signature: \_\_\_\_\_

*Use one form for each nomination. One form will only count for specific chapter who is submitting form (If Advisor supervises multiple chapters). All award guidelines apply. Submit all supporting documentation and letters as listed in the guidelines.*



# COLLEGIATE ADVISOR OF THE YEAR

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Chapter Advisor to be Nominated: \_\_\_\_\_

Year Completed Advisors Training: \_\_\_\_\_

## Chapter Information

Chapter Name: \_\_\_\_\_

Chapter Address: \_\_\_\_\_  
Number and Street Name or P.O. Box

\_\_\_\_\_ Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Collegiate Chapter Submitting Form: \_\_\_\_\_

President's Printed Name: \_\_\_\_\_ Secretary's Printed Name: \_\_\_\_\_

President's Signature: \_\_\_\_\_ Secretary's Signature: \_\_\_\_\_

Use one form for each nomination. One form will only count for specific chapter who is submitting form (If Advisor supervises multiple chapters). All award guidelines apply. Submit all supporting documentation and letters as listed in the guideless. **Submissions MUST done by collegiate chapter ONLY.**

# SIGMA BETA CLUB OF THE YEAR

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## Sigma Beta Club Information

Club Name: \_\_\_\_\_

Chapter Address: \_\_\_\_\_  
Number and Street Name or P.O. Box

\_\_\_\_\_ Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Sponsoring Graduate Chapter Information:

Chapter Name: \_\_\_\_\_

Chapter Address: \_\_\_\_\_  
Number and Street Name or P.O. Box

\_\_\_\_\_ Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

President Name: \_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ Email: \_\_\_\_\_

Sigma Beta Club Advisor Name: \_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ Email: \_\_\_\_\_

Sigma Beta Club President Name: \_\_\_\_\_ SBC President Signature: \_\_\_\_\_

Sigma Beta Club Advisor: \_\_\_\_\_ Sigma Beta Advisor Signature: \_\_\_\_\_

*To qualify, the nomination packet must include evidence that the Sigma Beta Club has been properly registered with the IHQ. Submit all supporting documentation and letters as listed in the award guidelines. Newspaper articles, pictures, and other testimonials may be included.*

# SIGMA BETA CLUB ADVISOR OF THE YEAR

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## Sigma Beta Club Information

Club Advisor Nominee: \_\_\_\_\_

Club Name: \_\_\_\_\_

Chapter Address: \_\_\_\_\_

Number and Street Name or P.O. Box

\_\_\_\_\_

Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Sponsoring Graduate Chapter Information:

Chapter Name: \_\_\_\_\_

Chapter Address: \_\_\_\_\_

Number and Street Name or P.O. Box

\_\_\_\_\_

Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

President Name: \_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ Email: \_\_\_\_\_

Sigma Beta Club Advisor Name: \_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ Email: \_\_\_\_\_

Sigma Beta Club President Name: \_\_\_\_\_ SBC President Signature: \_\_\_\_\_

Sigma Beta Club Advisor: \_\_\_\_\_ Sigma Beta Advisor Signature: \_\_\_\_\_

Advising Graduate Chapter Name: \_\_\_\_\_

Chapter Advisor's Signature: \_\_\_\_\_

*To qualify, the nomination packet must include evidence that Sigma Beta Club has been properly registered with the IHQ. Submit all supporting documentation and letters as listed in the award guidelines. Newspaper articles, pictures, and another testimonial may be included.*

# GRADUATION SCROLL

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List Chapter Brothers graduating between Spring 2021 and Fall 2021 semesters. Please attach photo of each new member.

Chapter Name: \_\_\_\_\_

Chapter Address: \_\_\_\_\_  
Number and Street Name or P.O. Box

\_\_\_\_\_ Apt No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

President Name: \_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ Email: \_\_\_\_\_

Chapter President Signature: \_\_\_\_\_

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Graduating Brother Name: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Major: \_\_\_\_\_ Degree: \_\_\_\_\_

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Graduating Brother Name: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Major: \_\_\_\_\_ Degree: \_\_\_\_\_

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Graduating Brother Name: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Major: \_\_\_\_\_ Degree: \_\_\_\_\_

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Graduating Brother Name: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Major: \_\_\_\_\_ Degree: \_\_\_\_\_

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Graduating Brother Name: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Major: \_\_\_\_\_ Degree: \_\_\_\_\_

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Graduating Brother Name: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Major: \_\_\_\_\_ Degree: \_\_\_\_\_

Please make additional copies if extra space is needed

# New Member Roll Call

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List newly initiated Brothers who were initiated between January 1, 2021, through December 31, 2021. Please attach a photo of each new member.

Brother's Name: \_\_\_\_\_ Chapter Name: \_\_\_\_\_

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

Current City (Alumni)/Hometown (Collegiate): \_\_\_\_\_

Major/Bachelor's degree and College/University: \_\_\_\_\_

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Brother's Name: \_\_\_\_\_ Chapter Name: \_\_\_\_\_

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

Current City (Alumni)/Hometown (Collegiate): \_\_\_\_\_

Major/Bachelor's degree and College/University: \_\_\_\_\_

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Brother's Name: \_\_\_\_\_ Chapter Name: \_\_\_\_\_

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

Current City (Alumni)/Hometown (Collegiate): \_\_\_\_\_

Major/Bachelor's degree and College/University: \_\_\_\_\_

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Brother's Name: \_\_\_\_\_ Chapter Name: \_\_\_\_\_

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

Current City (Alumni)/Hometown (Collegiate): \_\_\_\_\_

Major/Bachelor's degree and College/University: \_\_\_\_\_

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Brother's Name: \_\_\_\_\_ Chapter Name: \_\_\_\_\_

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

Current City (Alumni)/Hometown (Collegiate): \_\_\_\_\_

Major/Bachelor's degree and College/University: \_\_\_\_\_

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Please make additional copies if extra space is needed