

**WASHINGTON DC ALUMNAE CHAPTER
DELTA SIGMA THETA SORORITY, INC.**



DELTA SIGMA THETA
WASHINGTON DC
ALUMNAE CHAPTER

**2018 CONTINUING STUDENT
SCHOLARSHIP APPLICATION**

APPLICATION DEADLINE:

Application package must be **POSTMARKED** by
March 1, 2018

www.wdcacdst.org

APPLICATION PROCEDURES

The applicant must meet the following criteria in order to be eligible for a continuing scholarship:

- Must be a permanent resident of Washington, DC.
- Have been a previous Washington, DC Alumnae Chapter (WDCAC), Delta Sigma Theta Sorority, Incorporated scholarship recipient awarded by the WDCAC Scholarship Committee.
- Must currently be enrolled at an accredited four-year university or college as a full-time undergraduate student **OR** must be currently enrolled as a full-time student at an accredited community college.
- Must have a 2.5 cumulative grade point average.
- Must plan to be enrolled at an accredited four-year university or college as a full-time undergraduate student **OR** as a full time student at an accredited community college in the fall of 2018.
- Is not an immediate relative, *i.e.*, child, of a member of the Washington DC Alumnae Chapter, Delta Sigma Theta Sorority, Inc.

The following documents must be attached to your completed application form:

- Official University/College Transcript**
 - 1) The transcript must be in a sealed envelope;
 - 2) The transcript must cite the cumulative grade point average; and
 - 3) The transcript must be stamped with the official school seal.
- School Recommendation**¹
 - 1) One signed letter of recommendation from your current college/university (*i.e.*, advisor or major academic teacher) highlighting academic achievement;
 - 2) The letter of recommendation must be on official school letterhead; and
 - 3) The letter must contain the **original signature (no photocopied or electronic signatures, please)** of the advisor or major academic teacher.
- Community Service Recommendation**¹
 - 1) One signed letter of recommendation from an organization verifying current community service involvement;
 - 2) The letter of recommendation must be on the organization's official letterhead; and
 - 3) The letter must contain the **original signature (not photocopied or electronic)** of an official or authorized representative of the organization.

¹Persons writing letters of recommendation should specify relationship or capacity in which they know or have observed the applicant. Unsigned letters or letters that do not include original signatures will not be accepted, resulting in the application package deemed incomplete.

- Autobiographic Essay.** **Typed**, one page autobiographic essay that includes the following information:

- 1) Your academic/career goals,
 - 2) Community service involvement,
 - 3) Statement of your college experience/successes over the past twelve months, and
 - 4) The expected benefit to be derived if you receive a scholarship.
- Signatures.** Scholarship application must be signed by the student. (*Original signature required. No photocopied or electronic signatures, please.*)

If any items are omitted, the application will be deemed incomplete and will not be considered. Incomplete packages will not be returned. All information provided is considered confidential. All materials become the property of the Washington DC Alumnae Chapter, Delta Sigma Theta Sorority, Incorporated.

Submit application along with all attachments listed above to:

**Washington DC Alumnae Chapter
Delta Sigma Theta Sorority, Inc.
P.O. Box 90202
Washington, DC 20090-0202
ATTENTION: Scholarship Committee**

APPLICATION DEADLINE:
All materials must be POSTMARKED by MARCH 1, 2018

For questions regarding the application process contact:

Andrea Williams, Chair, Scholarship Committee
scholarship@wdcaedst.org
(202) 255-6810

**Washington DC Alumnae Chapter
Delta Sigma Theta Sorority, Inc.
2018 CONTINUING STUDENT
SCHOLARSHIP APPLICATION**

The entire application form MUST be typed

(Electronic copy of application also available on Chapter website: www.wdcacdst.org)

APPLICANT INFORMATION

Name: _____
Last First MI

Date of Birth: _____

Gender: Male Female

List the year(s) that you received a scholarship from the Washington DC Alumnae Chapter,
Delta Sigma Theta Sorority, Inc., Scholarship Committee: _____

Current Address at School: _____
Street Address & Apt. Number

City/State/Zip Code

School Phone: _____
Area Code/Number

Cellular Phone: _____
Area Code/Number

E-Mail Address: _____

Permanent Home Address: _____
Street Address/Apt. Number

City/State/Zip Code

Home Phone: _____
Area Code/Number

SCHOOL INFORMATION

Name of College/University Currently Attending: _____

Cumulative Grade Point Average (GPA): _____

Expected Date of Graduation: _____

FAMILY INFORMATION

Name of Mother/Female Legal Guardian: _____

Address: _____
(Street Address, Apt. Number) (City/State/Zip Code)

Home Phone: _____
Area Code/Number

Work Phone: _____
Area Code/Number

Cell Phone: _____
Area Code/Number

E-Mail Address: _____

Name of Father/Male Legal Guardian: _____

Address: _____
(Street Address, Apt. Number) (City/State/Zip Code)

Home Phone: _____
Area Code/Number

Work Phone: _____
Area Code/Number

Cell Phone: _____
Area Code/Number

E-Mail Address: _____

PLEASE TYPE ALL INFORMATION

HONORS AND AWARDS

List all honors and awards that you have received during college. Please include dates and a description of the award(s). (Use additional sheets as needed)

Honors and Awards	Date Received
_____	_____
_____	_____
_____	_____
_____	_____

EXTRACURRICULAR ACTIVITIES

List all extracurricular activities (including school, community, academic related internships and work study jobs) that you have participated in during college. Please include a description of activities, positions held, and dates involved. (Use additional sheets as needed)

Activity	Position Held/Duties	Dates (To/From)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PLEASE TYPE ALL INFORMATION

CERTIFICATIONS

Please indicate by your signature (**original signature only**) below that you certify that the statements are correct.

1. I certify that all information provided is correct and complete to the best of my knowledge. I give the Washington DC Alumnae Chapter, Delta Sigma Theta Sorority, Incorporated permission to verify any information contained in my information package, as necessary. I understand that misrepresentation of any information or the submission of inaccurate or incomplete information will result in disqualification to be considered for a scholarship or forfeiture of any award that I may receive.

2. I certify that the applicant: (please check all that apply)

- (a) is a permanent resident of Washington, DC
- (b) is a prior scholarship recipient from the Washington DC Alumnae Chapter, Delta Sigma Theta Sorority, Inc.
- (c) is currently enrolled at an accredited four-year university or college as a full-time undergraduate student, **OR** currently enrolled as a full-time student at an accredited community college
- (d) plans to continue enrollment at an accredited four-year university or college as a full-time undergraduate student in the fall of 2018, **OR** plans to continue enrollment at an accredited community college as a full-time student
- (e) has a 2.5 cumulative grade point average
- (f) is not an immediate family member of a member of Washington, DC Alumnae Chapter of Delta Sigma Theta Sorority, Incorporated.

3. I understand that if the applicant is awarded a scholarship the funds will be made payable to the applicant and his/her college/university and will be sent directly to the college/university once the proper verification forms have been completed and returned to the Washington DC Alumnae Chapter, Delta Sigma Theta Sorority, Incorporated.

(Applicant's Signature)

(Month/Date/Year)