



Delta Sigma Theta Sorority, Inc.
Gastonia Alumnae Chapter
Post Office Box 1482 Gastonia, North Carolina 28053

January 1, 2012

To Whom It May Concern:

The Gastonia Alumnae Chapter of Delta Sigma Theta Sorority, Inc. is an organization of college educated women committed to constructive development of its members and community service. The Sorority's primary focus is on females in the African-American community. Each year, our Sorority offers scholarships in recognition of our mission and heritage to deserving young women who are high school seniors seeking higher education at a four-year institution. Therefore, we hope that the female high school seniors who share our goals and purpose will apply.

Completed applications must be postmarked by Monday April 16, 2012 and sent to:

Delta Sigma Theta Sorority, Inc.
Gastonia Alumnae Chapter
c/o Mrs. Marilyn A. Green
Post Office Box 1482
Gastonia, North Carolina 28053

Incomplete applications will not be reviewed.

APPLICANT ELIGIBILITY: All Applicants Must:

- Δ Be female high school seniors who are planning to enroll in a Four-year College or University
- Δ Reside in Gaston County or a Gaston County High School and graduate by June 2012
- Δ Have a minimum cumulative Grade Point Average of 'B' or 80% average, 2.75 on a 4.0 scale
- Δ Have applied for Fall 2010 admission/enrollment in a Four-year College or University
- Δ Have most recent/highest SAT/ACT scores and 1st Semester Grades

All interviews will be scheduled during the month of May 2012.

Thank you for your interest in our scholarship program.
Sincerely,

Marilyn A. Green

Marilyn A. Green
Scholarship Committee Chair



Delta Sigma Theta Sorority, Inc.
Gastonia Alumnae Chapter
Post Office Box 1482 Gastonia, North Carolina 28053

January 1, 2012

Dear Counselors/Teachers,

The Gastonia Alumnae Chapter of Delta Sigma Theta Sorority, Inc. extends the opportunity to students to apply for a scholarship as a part of our Educational Program. Every year our chapter provides scholarships to female high school seniors who have a strong desire to continue their educational experience.

We would greatly appreciate it if you would inform these young ladies about this wonderful opportunity. Please note that each application has a Counselor/Teacher Form that must be completed by you and sent in with each application. If you should have any questions regarding this application process, please feel free to contact Marilyn A. Green at 704-898-2858. The application deadline is **April 16, 2012.**

Applications may be duplicated if more are needed.

Thank you for your support.

Sincerely,

Donyel B. Barber

Donyel B. Barber
President

Delta Sigma Theta Sorority, Inc.
Gastonia Alumnae Chapter

Scholarship Application 2012

GUIDANCE COUNSELOR/TEACHER RECOMMENDATION FORM

Applicant's Name: _____

This student is an applicant for a scholarship awarded by Gastonia Alumnae Chapter, Delta Sigma Theta Sorority, Inc. The Gastonia Alumnae Chapter of Delta Sigma Theta Sorority, Inc. is an organization of college-educated women committed to constructive development of its members and to service, with a primary focus on women in the African-American community. We thank you for taking the time to aid us in our review of this applicant's qualifications for our scholarship. All information is considered confidential.

To the Recommender: After completing this recommendation form, return it to the applicant in a sealed envelope with your signature on the seal. This recommendation is a required part of the scholarship application package so a prompt return to the applicant is important in order to meet the following deadline: April 16, 2012. If you have any questions regarding this application process, please contact Mrs. Marilyn A. Green, Scholarship Chairperson at (704) 898-2858.

Please complete Sections A and B of this recommendation form.

Section A:

Recommender's Information

Name & Title: _____

E-mail: _____ Phone: _____

High School: _____

How long and in what capacity do you know the applicant? _____

How long have you known the applicant? _____

Recommender's Signature & Date : _____

Recommender's Signature & Date : _____

Section B: Please rate the applicant using the scale below.

| Scale Item | Excellent | Good | Fair | Poor | No Basis for Judgment |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <i>Academic Performance</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Communication/Interpersonal Skills</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Leadership Skills</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Work ethic and Responsibility</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Creativity</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Emotional Maturity</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Self Confidence</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Community Service/Citizenship</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Diligence/Commitment</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Motivation to attend College</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Delta Sigma Theta Sorority, Inc.
Gastonia Alumnae Chapter

Scholarship Application 2012

APPLICANT ELIGIBILITY: All Applicants Must:

- Δ Be a female high school senior, planning to enroll in a four-year College or University
- Δ Reside in Gaston County and attend a public or private school
- Δ Have a minimum cumulative Grade Point Average of 2.75 on 4.0 scale
- Δ Have applied for Fall 2012 admission/enrollment in a Four-year College or University
- Δ Have November or December SAT/ACT scores and 1st Semester Grades

EVALUATION CRITERIA

- Δ Factors considered by the Scholarship Selection Committee in evaluating applications include leadership, community involvement, academic achievement, and financial need.
- Δ **Unofficial and/or unsealed transcripts as well as recommendations will not be accepted.**
- Δ **Applications received after the deadline April 16, 2012 will not be reviewed.**
- Δ **Incomplete applications will not be reviewed.**
- Δ **NOTE: Application materials will not be returned.**

APPLICATION CHECKLIST

- Δ Completed application and supporting documents must be submitted as one completed application package and **received or postmarked by Monday April 16, 2012 to be reviewed**
- Δ **A completed application package is as follows:**

- Completed application with signed *Declaration*
- One page, typed Biographical Essay
- Official transcript with cumulative **GPA. Note- required in a sealed envelope**
- SAT and ACT** listed on transcript or included on official form in sealed envelope
- Résumé (Optional – to complete *Part III – Work Experience* on application)
- Three Letters of Recommendation written to Delta Sigma Theta Sorority, Inc.—Gastonia Alumnae Chapter
- College acceptance letter, if received
- Recent photo required **Note- please submit in a separate sealed envelope labeled -PHOTO**

*** Photo will not be returned***

SCHOLARSHIP INTERVIEW

Applicants who qualify will be contacted by the scholarship committee and informed of interview date, time and location. Award recipients will be notified by June 2012.

COMPLETED APPLICATIONS SHOULD BE MAILED TO:

Delta Sigma Theta Sorority, Inc.: Gastonia Alumnae Chapter
Attention: Scholarship Committee
Post Office Box 1482
Gastonia, North Carolina 28053

DECLARATION

I hereby declare that all of the above statements are true. I have also included with this application the necessary official transcript and letters of recommendation in sealed envelopes. I am willing to appear for a personal interview and to forward any additional information if necessary. I agree to accept the decision of the Scholarship Committee of Delta Sigma Theta Sorority, Inc., Gastonia Alumnae Chapter.

Applicant Signature

____/____/____
Date

Delta Sigma Theta Sorority, Inc.
Gastonia Alumnae Chapter

Scholarship Application 2012

(Please Type or Print All Information with a Black Ballpoint Pen)

I. PERSONAL DATA

Name: _____
Last First Middle

Address: _____
Number Street City, State Zip

DOB: ____/____/____ Home Phone: _____ Cell Phone: _____
month/day/year

E-Mail Address: _____

Parent(s) Name(s): _____

Parent Address: _____

If different than above

High School Name: _____

High School Address: _____
Number Street City, State Zip

Dates Attended: *from* _____ *to* _____ Current GPA*: _____ Scale of _____

***Must have a cumulative GPA of 2.75 on a 4.0 scale**

II. ORGANIZATIONAL INVOLVEMENT, HONORS & SPECIAL INTERESTS

(Include all leadership activities, special programs, internships, etc. in which you have been involved.)

1. List the organizational memberships and offices you have held in your **School**.

| <i>Organizations</i> | <i>Office(s) Held and Year</i> |
|----------------------|--------------------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

2. List the organizational memberships and offices you have held in your **Community**.

| <i>Organizations</i> | <i>Office(s) Held and Year</i> |
|----------------------|--------------------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

3. List your Honors/Awards, the Organization and the Year You Received Them.

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

4. List Your Special Interests/Hobbies:

Delta Sigma Theta Sorority, Inc.
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Scholarship Application 2012

III. WORK EXPERIENCE (Option — You may attach a current resumé for Part III)

List any work experience (Include job title, employer and dates of employment)

Employer:

Address:

Job Title:

Dates of Employment:

IV. EDUCATIONAL PLANS

1. REQUIRED BIOGRAPHICAL SKETCH

△ One Page (250-500 Words) Typed Essay Entitled “*Delta Sigma Theta Scholarship Essay*”

△ **Include the Following Information at the Top of Your One Page Document**

- | | |
|--|---|
| <input type="checkbox"/> Name | <input type="checkbox"/> Home Address |
| <input type="checkbox"/> Telephone Numbers-Home and Mobile | <input type="checkbox"/> E-Mail Address |

△ **Address the Following Three Topics:**

- Your Life Goals (academic, professional, and personal)
- Your Community Service Activities and Any Special Honors Received
- How Obtaining a Scholarship From Delta Sigma Theta Will Benefit You

2. POTENTIAL COLLEGE/UNIVERSITY:

| | <i>INSTITUTION 1</i> | <i>INSTITUTION 2</i> | <i>INSTITUTION 3</i> |
|---|--|--|--|
| <i>Institution Name</i> | | | |
| <i>Institution Location (City & State)</i> | | | |
| <i>Application Status</i> | <input type="radio"/> <i>Pending</i> <input type="radio"/> <i>Accepted</i> <input type="radio"/> <i>Rejected</i> | <input type="radio"/> <i>Pending</i> <input type="radio"/> <i>Accepted</i> <input type="radio"/> <i>Rejected</i> | <input type="radio"/> <i>Pending</i> <input type="radio"/> <i>Accepted</i> <input type="radio"/> <i>Rejected</i> |
| <i>Annual Tuition</i> | \$ | \$ | \$ |

Delta Sigma Theta Sorority, Inc.
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Scholarship Application 2012

VI. OTHER SCHOLARSHIP/FINANCIAL AWARDS

List any other scholarships of financial awards you have applied for, received or that are pending

| <i>Gifts, Awards, & Scholarships</i> | <i>Term of Award</i> <i>(1 yr; 4 yr; Renewable, etc.)</i> | <i>Total Amount</i> <i>Of the Award</i> |
|--|--|--|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| Grand Total Gifts, Awards, & Scholarships | | |

VII. RECOMMENDATIONS

Submit (1) Guidance Counselor/Teacher Form (Enclosed) and (2) Letters of Recommendation

Δ Recommendations may **NOT** be from RELATIVES of the applicant

Δ Letters must be addressed to Delta Sigma Theta Sorority – Gastonia Alumnae Chapter

Δ Must be written on recommender’s official letterhead, signed, and dated

Δ Submitted in a sealed envelope with the recommender’s signature across the seal

Δ Recommendation letters must be returned to you for submission with the application package

**Letter of Recommendation from Community Service Leader/Supervisor or Church Official
Recommendations must address:**

Δ Length of time they have known you and in what capacity

Δ Description of your community activities/involvements

Δ Description of your character

Δ Recommender’s job title and contact information

Please Note: All recommendation forms should have a signature over the sealed flap.