



**MONTGOMERY COUNTY (MD)  
ALUMNAE CHAPTER  
DELTA SIGMA THETA SORORITY, INC.**

**IN ASSOCIATION WITH**

**MONTGOMERY COUNTY (MD)  
DELTA ALUMNAE FOUNDATION, INC.**

**2012**

**COUNTY-WIDE**

**SCHOLARSHIP APPLICATION**

## **DELTA SIGMA THETA SORORITY, INC.**

Delta Sigma Theta Sorority, Inc. is an organization of college-educated women committed to the constructive development of its members and to public service with a primary focus on the Black community. Information about Delta Sigma Theta Sorority, Inc. may be found at [www.deltasigmatheta.org](http://www.deltasigmatheta.org). Information about the Montgomery County (MD) Alumnae Chapter (MCAC) can be found at [www.mcacdst.org](http://www.mcacdst.org).

## **SCHOLARSHIP AWARDS**

The Montgomery County (MD) Alumnae Chapter Scholarship Program was created to provide financial assistance to students who reside in Montgomery County, MD. Scholarships will be awarded to graduating high school seniors who have excelled academically and contributed their talents to the improvement of their community. The chapter will award scholarships with a maximum amount of \$5,000.

## **ELIGIBILITY REQUIREMENTS**

To be considered for a scholarship, the applicant must:

- Be a resident of Montgomery County, Maryland
- Be a graduating senior – May or June 2012
- Have a scholastic average of 2.5 or higher
- Enter a four-year university or college as a full-time freshman in the Fall of 2012
- Not be an immediate relative of a member of Montgomery County (MD) Alumnae Chapter of Delta Sigma Theta Sorority, Inc.

## APPLICATION PROCEDURE

To be considered for a scholarship, a completed application must be sent by the applicant to the address listed below, postmarked by February 24, 2012. Applications received after the postmarked date will not be considered. Your completed application must include the following:

1. Scholarship Application (Application must be signed and dated)
2. Two Letters of Recommendation
  - (a) A letter of recommendation must be completed by a teacher or counselor at your school. The letter must be on letterhead and include length of time that the recommender has known the applicant and in what capacity. Please include comments regarding intellectual ability, maturity, motivation, interpersonal skills, and verbal and writing skills. Also include contact information for all references.
  - (b) A letter from a community service provider on organization's letterhead, signed by an official. The letter must demonstrate active involvement to benefit the organization and community. Please do not list church activities common to all churches such as Sunday school teacher and singing in the choir. Those activities are self-serving involvement and do not meet public service criteria of Delta Sigma Theta Sorority, Inc.
3. An official high school transcript with SAT or ACT scores. The transcript should be mailed directly from your school to the address below, or mailed by you in an envelope sealed by a school official, with the official's signature or the school stamp across the sealed portion of the envelope.
4. Two 500 word essays addressing the following topics:
  - (A) My involvement in my community; and
  - (B) A personal experience that has had a significant impact on my life.Each essay must be type-written and will be evaluated based on content, grammar, and presentation.
5. Color photograph (ex. wallet size senior picture)

The photo will be used for identification and if selected it will be featured in the scholarship program brochure.

The Scholarship Committee will review all complete applications, (including transcripts and letters of recommendation) postmarked no later than February 24, 2012 and returned to the address below. All information is considered confidential.

Dr. LaWanda V. Peace, Chair  
Scholarship Committee  
Delta Sigma Theta Sorority, Inc.  
Montgomery County Alumnae Chapter  
P.O. Box 4236  
Silver Spring, Maryland 20914-4236

Finalists must participate in an in-person interview to be given further consideration.

## PERSONAL INFORMATION (please print or type)

Name of Student (Last, First, Middle Initial)		Date of Birth
Permanent Address		
City	State	Zip Code
Home Telephone Number	Cell Phone Number	
E-Mail Address		
Name of Parent(s)/Guardian		

## SCHOOL INFORMATION (please print or type)

Name of High School	City/State	Zip Code
School Counselor Name	Counselor Phone Number	
Expected Graduation Date (MM/DD/YY)	Cumulative GPA	

## COLLEGE APPLICATIONS (list all Colleges/University to which you have applied. Place an asterisk next to those that have accepted you)

University/College	University/College		
University/College	University/College		
Intended Major/Career Interest			
Have you applied for Financial Assistance?  ___ Yes ___ No	If yes, list the sources of the financial assistance. Giving the name of the award/scholarship, source of the award, and amount		
	<b>NAME OF AWARD/SCHOLARSHIP</b>	<b>SOURCE</b>	<b>AMOUNT</b>
Have you been awarded financial assistance or scholarship?  ___ Yes ___ No			

## COMMUNITY SERVICE ESSAY

Delta Sigma Theta Sorority Inc. is a public service organization and your contribution to your community is important to us. Write a 500 word essay addressing the following topic: ***“My Involvement in My Community”***. Your essay must be typed and will be evaluated based on content, grammar, and presentation.

## PERSONAL ESSAY

Write a 500 word essay addressing the following topic: ***“A personal experience that has had a significant impact on my life”***. Your essay must be typed and will be evaluated based on content, grammar, and presentation.

## CERTIFICATION

By the signature below, you affirm that all information you provide is true and complete to the best of your knowledge. Submission of inaccurate or incomplete information will result in disqualification or forfeiture of any award.

Applicant Signature	Date
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