

**Delta Sigma Theta Sorority, Inc.**  
**Madison Alumnae Chapter**  
**P.O. Box 2672, Madison, WI 53701**  
**2019 Scholarship Application**



Applications must be typed.  
 Incomplete applications will not be considered.

**\*\*The children of members of Delta Sigma Theta Sorority, Inc. are ineligible to apply.\*\***

Full Name: \_\_\_\_\_

Gender:     Female     Male

Race/Ethnicity (*Please indicate the race or ethnic background with which you identify: Latinx/Hispanic; Black or African-American; American Indian or Alaska Native; Asian; Native Hawaiian or Other Pacific Islander:*)  
 \_\_\_\_\_

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

Student E-mail Address: \_\_\_\_\_

Parent E-mail Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Parent/Guardian's Cell Phone: \_\_\_\_\_

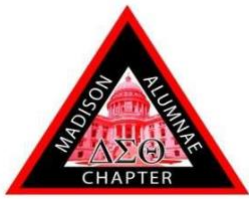
Local High School Attending: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_

Your Cumulative GPA: \_\_\_\_\_

List all colleges/universities to which you've applied and your corresponding admission decision. Indicate *pending* if you are still awaiting a decision. You may attach an additional sheet, if necessary:

College/University Name	Admission Decision



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List the extra-curricular activities, and community/volunteer experience in which you've been involved during high school. Be sure to include dates of participation and location. You may attach an additional sheet, if necessary

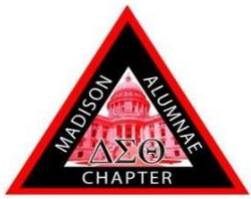
Club or Organization	Location	Dates of Participation

List any honors or awards you've received during high school, and the year received. You may attach an additional sheet, if necessary:

Name of Award	Year Received

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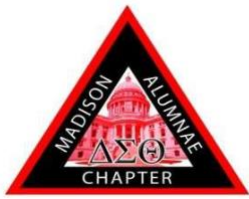
Please indicate what you plan to study in college, and the career path you are currently considering (If you are undecided about your college major, tell us about the academic subjects you most enjoy.) Please limit your response to no more than 250 words.



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*For full consideration, completed applications must be **POSTMARKED** by Friday, March 22, 2019.  
Students must have achieved a cumulative grade point average of 2.5 to apply.*



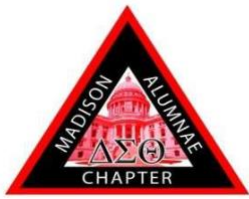
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Personal Essays

Please respond to the following questions with an essay of no more than 550 words each. Only typed submissions will be accepted; those that are handwritten will not be considered.

1. What does leadership mean to you? How do you demonstrate leadership in your daily life?
  2. If you were to develop a new public service program to meet the needs of our community, what would the program be and what need would it serve? Why have you selected this program?
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## Verification Form

By completing this application, I acknowledge my understanding that the Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc will review all information submitted, including completed scholarship application, official high school transcript(s), letters of recommendation(s) and community/volunteer service(s) information. I further acknowledge my understanding that the final decision regarding scholarship recipients will be decided by the Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc. and no other entity. The Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc. is not responsible for reviewing any late or misdirected applications (and accompanying materials) if they are not POSTMARKED by Friday, March 22, 2019. **Only complete applications will be reviewed.**

\_\_\_\_\_  
Applicant Name

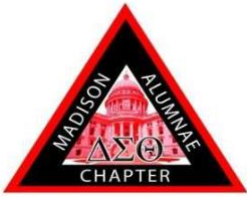
\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Parent or Legal Guardian  
(for applicants under 18 years old)

\_\_\_\_\_  
Parent or Legal Guardian Signature  
(for applicants under 18 years old)

\_\_\_\_\_  
Date



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### Name and Photo Publication Permission

I hereby give the Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc., the right and permission to use, with respect to any photographs that have been taken of me in groups in which I may be included:

- a) To copyright the same in their own name or any other name they may choose;
- b) To use, reuse, publish, and republish the same in whole or in part, individually or in conjunction with other photographs, in any medium and for any purpose whatsoever, including (but not by way of limitation) illustration, promotion, advertising and educational information.

I release and discharge the Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc., from any and all claims and demands arising out of or in connection with the use of the photographs, including any and all claims for libel.

The Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc., may publish my name if I am selected as a scholarship recipient.

I am over the age of 18. I have read the information above and fully understand and agree to the contents thereof.

\_\_\_\_\_  
Applicant Name

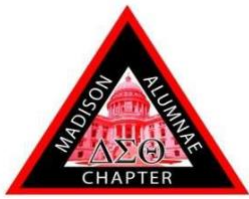
\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Parent or Legal Guardian  
(for applicants under 18 years old)

\_\_\_\_\_  
Parent or Legal Guardian Signature  
(for applicants under 18 years old)

\_\_\_\_\_  
Date



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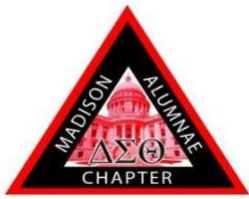


### Application Checklist

Use this form to ensure you have completed and submitted ALL required documentation. Incomplete applications will not be reviewed:

- Completed Scholarship Application (must be postmarked by Friday, March 22, 2019)
- Official High School Transcript (Transcript(s) must be submitted in a SEALED envelope from your high school in order to be considered official)
- Two Essays (no more than 550 words each):
  - What does leadership mean to you? How do you demonstrate leadership in your daily life?
  - If you were to develop a new public service program in our community, what would the program be, and what need would it serve? What have you selected this program?
- Letter of Recommendation from a Community Organization Representative (i.e. food pantry director, community service club advisor.) This letter must be submitted in a sealed envelope, along with your completed application.
- Letter of Recommendation from a School Official (i.e. guidance counselor, teacher with whom you have completed at least two classes.) This letter must be submitted in a sealed envelope, along with your completed application.
- Signed Verification Form
- Current Photo
- Signed Name and Photo Publication Permission





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## Guidelines for Letters of Recommendations

Two (2) letters of recommendation must be submitted from persons who can comment on your work, your achievements, your community service and your plans for the future. One letter must be written by a community organization representative, such as the community service club advisor or food pantry director.

The second letter must be written by a school official, such as the guidance counselor or a teacher with whom you have completed at least two classes. **Both letters of recommendation should be submitted in sealed envelopes, along with your application.** Letters may not be written by a family member.

Application Materials should be mailed (postmarked no later than Friday, March 22, 2019) to:  
The Madison Alumnae Chapter, Delta Sigma Theta Sorority, Inc.  
P.O. Box 2672  
Madison, WI 53701

1. Letter verifying Community/Volunteer Service - Written by an Organization Representative on Official Letterhead

Letter should include the following:

1. Name of organization; Letter MUST be provided on official organization/company letterhead
2. Name and position of person providing information
3. Length of time the student has been involved in the organization
4. Explanation of the student's involvement in the organization
5. Current and past role(s) and/or responsibilities of the student
6. Information regarding the student's strongest qualities and characteristics, as well as skills and accomplishments observed while volunteering with the organization
7. Letter should be addressed to the selection committee as a whole (e.g. Dear Scholarship Committee)

2. Letter of Recommendation - Written by a School Official on Official Letterhead

Letter should include the following:

1. Name of school, office or district; Letter MUST be provided on school letterhead
2. Name and position of person providing recommendation
3. Context in which the person providing the recommendation knows the student
4. Length of time the person providing the recommendation has known the student
5. Information regarding the student's orientation to succeed at the collegiate level, including information about academic performance in terms of things such as diligence to complete coursework and willingness to take on challenging material.) Please articulate exactly why this student is highly likely to succeed in a higher education setting.
6. Letter should be addressed to the selection committee as a whole (e.g. Dear Scholarship Committee)

Delta Sigma Theta Sorority, Inc. is a private, non-profit organization whose purpose is to provide assistance and support through established programs in local communities throughout the world.