



Delta Sigma Theta Sorority, Inc. Madison Alumnae Chapter P.O. Box 2672, Madison, WI 53701 Scholarship Application 2021

Delta Sigma Theta Sorority, Incorporated is a private, non-profit organization whose purpose is to provide assistance and support through established programs in local communities throughout the world. Since its founding more than 200,000 women have joined the organization. The organization is a sisterhood of predominantly Black, college educated women. The sorority currently has over 1,000 collegiate and alumnae chapters located in the United States, and abroad.

Delta Sigma Theta Sorority is a public service sorority that is committed to educational excellence. The Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc. believes in the importance of fostering the potential and accomplishments of high achieving African American students. The scholarship program is designed to provide assistance to high school students who exemplify academic excellence, strong leadership and community service and demonstrate a promising scholastic future.

The Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc. will award a limited number of scholarships in the amount of \$1000 each, to graduating African American male and female high school seniors who exemplify academic excellence, strong leadership and community service and demonstrate a promising scholastic future. The top scholarship recipient will also be awarded the Chapter's Visionary Award and will receive additional scholarship funds with a recognition plaque. Each scholarship is a one-time non-renewable award. Book awards may be offered to applicants who are not one of our top scholarship award recipients.

SCHOLARSHIP CRITERIA

The Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc. will award scholarship(s) and book awards to Dane County high school seniors who and meet the following requirements:

- Live in the Dane County area
- Plan to enroll (verification must be provided) as a full-time student, at a post-secondary institution for the 2021-22 academic school year
- Have a minimum 2.5 GPA
- Demonstrated participation in extra-curricular school activities, community service, leadership involvement, and scholastic achievement.

SCHOLARSHIP GUIDELINES AND SUBMISSION REQUIREMENTS

1. Completed application (Handwritten Applications will be disqualified) forms must be **signed** and **postmarked** no later than **March 1, 2021**.
2. Because of the number of students applying for scholarships each year, the primary form of communication will be through e-mail. On your scholarship application, please list a current e-mail address for you and a parent. If your e-mail address changes, please notify us.
3. The completed application with supporting documents should be mailed to: **Scholarship Committee, Delta Sigma Theta Sorority, Inc., Madison Alumnae Chapter, P.O. Box 2672, Madison, WI. 53701.**
4. Scholarship and book stipend award letters will be presented in **May 2021**. **Students or their parents must be present at the Scholarship Recipient Awards ceremony in order to receive the scholarship or book stipend.**
5. Scholarships will be awarded upon verification of enrollment from a college or university before **December 31st** of the scholarship award year. Verification entails an enrollment form completed by the institution with the registrar's signature and official seal of the institution. Scholarship checks will be made payable to the recipient and the college/university.
6. Unclaimed funds will be forfeited. Scholarship funds will be released once the student has provided their class schedule from their respective college or university to the Scholarship Committee.



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SCHOLARSHIP APPLICATION PRIORITY DATES

January 4, 2021	Application Materials Distributed to the Area High Schools, Churches and Community Organizations
March 1, 2021	Scholarship Applications Due. Must be postmarked by March 1, 2021
April 30, 2021	Notification of Scholarship awards
May 2021	Scholarship Awards Ceremony

The application deadline for the 2021-2022 scholarship application is March 1, 2021.

All application materials must be mailed to the following:

**Delta Sigma Theta Sorority, Incorporated
Madison Alumnae Chapter
P.O. Box 2672, Madison, WI. 53701**



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APPLICANT PROFILE

Applications must be typed. Applications will not be considered if they are handwritten.

****Children of Delta Sigma Theta members are ineligible to apply for this scholarship****

Name: _____

(First)

(Last)

(Middle)

Gender: Male Female (choose one) Race/Ethnicity _____

Address: _____

City: _____ State: ____ Zip Code: _____ Telephone: () _____

Age: _____ Birthday (month, year, date) _____

Student E-mail Address: _____

Local High School Attending: _____

Expected Graduation Date: _____

(1) Parent/Guardian Name: _____

Home Telephone: _____ Cell Phone: _____

Email: _____

(2) Parent/Guardian's Name: _____

Home Telephone: _____ Cell Phone: _____

Email: _____

Cumulative GPA (Please enclose current official transcript): _____

How did you find out about the scholarship? _____



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ACTIVITIES, HONORS & AWARDS

List all school activities (organizations and clubs) in which you have participated in high school. Please highlight any leadership positions held and check the grades participated.

Activity/Club	Office/Leadership Positions Held	Grade(s) Participated				Contact Person/Advisor (Name and Number)
		9	10	11	12	

List all community activities (church, civic, etc.) in which you have participated in high school. Please highlight any leadership positions held and check the grades participated.

Organization/Activity	Office/Leadership Positions Held	Grade(s) Participated				Contact Person (Name and Number)
		9	10	11	12	

List all honors and awards received (e.g., academic, church, community, sports) in which you have participated in high school. Please highlight any leadership positions held and check the grades participated.

Organization	Honors/Awards	Grade(s) Award Received				Contact Person/Advisor (Name and Number)
		9	10	11	12	



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In order of preference, please list the names and addresses of the schools to which you have applied or will be attending for the period in which this financial assistance is requested. Please use additional paper if necessary.

College/University	City/State	Application Status		
		Pending	Accepted	Rejected

Intended Major: _____

EMPLOYMENT

List any work experience over the past three years.

Employer	Position	Dates of Employment

PERSONAL ESSAY

Applicants are required to submit a typed essay in response to one (1) the following questions:

1. Describe an event or person who has changed or significantly impacted your life. Explain the change or impact that the event or person has had on you.
2. What social issues/challenges do you and your generation face today? Discuss your ideas for dealing with these issues/challenges

Essay Requirements:

- Typewritten (no handwritten essays will be accepted)
- Maximum of 500 words, single-spaced
- Times New Roman or Arial (font), 12-point font
- One-sided only
- Applicant name typed in the upper right-hand corner of each page

In reviewing the essays, the judges will consider correct use of grammar and punctuation, quality of ideas and organization of thoughts.



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LETTERS OF RECOMMENDATION

All applicants are required to submit a total of two (2) letters of recommendation: 1). Scholarship Recommendation letter; AND 2). Character Recommendation letter, as referenced below. The letters of recommendation should be typed, addressed to Madison Alumnae Scholarship Committee, and submitted in a sealed envelope with the reference's signature across the sealed portion.

Letter #1: Scholarship Recommendation Letter

- This letter should be written someone who can speak to your academic, community service or leadership positions and achievements. This includes teachers, supervisors, school counselors, coaches, etc.

Letter #2: Character Recommendation

- This letter should be from a Minister, Civic Leader, or Professional Person.

Letter Requirements

Your letters for both categories should include the following:

- Name, position and organization/school of reference (on official company/school letterhead)
- Context in which the person providing the recommendation knows the applicant
- Length of time the person providing the recommendation has known the applicant
- Explanation of the applicant's involvement in the organization
- Information regarding why the applicant should receive the scholarship award
- Address letter to the scholarship committee (e.g. Dear Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc., Scholarship Committee)



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CERTIFICATION AND VERIFICATION (Applicant & Parent/Guardian)

I certify that the information provided in this application is true, complete and accurate and that all statements and the enclosed essay are my own work. A scholarship award from Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc. may be denied or revoked if any information contained herein is found to be inaccurate. Should I receive an award, I hereby give Madison Alumnae Chapter of Delta Sigma Theta Sorority, Inc. permission to utilize my name, photographs and award amount in publicity and/or marketing materials.

By completing this application, I am acknowledging that the final decision of 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 any late or misdirected applications or other materials if they are not received by March 1, 2021. All submission are subject to final verification, including but not limited to, the current official high school transcript (s), letters of recommendations, and community/volunteer service information.

I, acknowledge and understand that the scholarship awards received by the winners will only be disbursed in a lump sum payment directly to the university/college identified by the scholarship recipient. *NOTE: The Enrollment Verification Form must be dated and notarized with the institution's official seal.*

Applicant Name: _____

Applicant Signature: _____ Date: _____

Parent/Guardian #1 Name: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian #2 Name _____

Parent/Guardian Signature: _____ Date: _____

*****APPLICATION DEADLINE: (Only completed applications will be considered)**

Applications must be signed and postmarked no later than MARCH 1, 2021.

RETURN TO: Delta Sigma Theta Sorority, Incorporated

Madison, Alumnae Chapter, Scholarship Committee

P.O. Box 2672, Madison, WI. 53701

All information is subject to VERIFICATION.

Scholarship Recipients will be notified by April 30, 2021.

If there are any questions or concerns, please e-mail us at madisondstscholarship@gmail.com



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SCHOOL COUNSELOR CERTIFICATION

To be given to and completed by high school counselor. Once completed, the counselor must stamp the form with the official school seal in an envelope.

Name of School: _____

Address: _____

City/Town: _____ State: _____ Zip Code: _____

Name of Guidance Counselor: _____

Cumulative Grade Point Average (GPA): _____

Name of Applicant _____
(First) (Last) (M.I.)

High school GPA (computed on 4.0 scale): _____

Official transcripts must be submitted along with this application. The transcript must include:

- Grades from the 9th to the 11th school years
- Cite cumulative grade point average
- Signed by a school official
- Stamped with the official school seal and mailed in a sealed envelope.

Name of School Counselor: _____ Date _____

Signature of School Counselor _____

Email Address _____ Contact Number _____



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APPLICATION CHECKLIST

Please make sure you have all following items completed prior to submitting your application for full consideration, otherwise your application will be deemed incomplete and rejected:

- A completed, typed application packet **MUST** be postmarked and/or received by March 1, 2021. Feel free to attach additional typed pages if you need to.
- Personal Essay. A single-spaced, one-page typed essay answering one of the following questions:
 1. Describe an event or person who has changed or significantly impacted your life. Explain the change or impact that the event or person has had on you.
OR
 2. What social issues/challenges do you and your generation face today? Discuss your ideas for dealing with these issues/challenges
- School Counselor Verification (**Sealed in an Envelope**)
- Current **Official** High School Transcript (**Sealed in an Envelope**)
- Two (2) Letters of Recommendation, in sealed envelopes with signature across the seal.
Letter #1: Scholarship Recommendation Letter (Sealed in an envelope with the application)
Letter #2: Character Recommendation (Sealed in an envelope with the application)
 - This letter should be from a Minister, Civic Leader, or Professional Person.
- Signed** Certification and Verification Form by student AND Parent/Guardian
- Current Photo. Please Note: A Photo must be included with your Application to be considered, absence of a photo is an automatic rejection

****KEEP A COPY OF THE APPLICATION AND ALL ATTACHMENTS FOR YOUR RECORDS****

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