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

2021-2022

SCHOLARSHIP APPLICATION

High School Seniors







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 the National Organization of Delta Sigma Theta Sorority, Inc. may be found at www.deltasigmatheta.org. Information about the local chapter, Montgomery County (MD) Alumnae Chapter (MCAC), can be found at 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, and contribute their skills and talents towards the improvement of the community. The Scholarship Program currently has the following types of scholarships, which are described below:

1. County-Wide Scholarship

The County-Wide Scholarship was established to provide financial awards for high school students who have excelled in their academics.

2. MCAC Educational Program Scholarship

The Montgomery County (MD) Alumnae Chapter (MCAC) Educational Program Scholarship was established to provide financial awards to high school students who have participated in the MCAC Educational Program for a minimum of two consecutive years.

3. Career/Vocational/TechnicalScholarship

The Vocational/Technical Scholarship was established to provide financial awards to students who want to advance their education/skill set by enrolling in a career/ vocational/technical program. These programs are traditionally described as those that focus on specific vocational skills needed within certain occupations.

ELIGIBILITY REQUIREMENTS

Please note that you may apply for more than one scholarship type.

Requirement	MCAC Educational Program Scholarship	Career/ Vocational Technical Scholarship	County-Wide Scholarship
Residency	Resident of Montgomery County, Maryland	Resident of Montgomery County, Maryland	Resident of Montgomery County, Maryland
Student Status	High School senior of a Montgomery County, MD school, graduating the academic year in which the scholarship is being announced	High School Diploma or a General Education Development (GED) Diploma	High School senior of a Montgomery County, MD school, graduating the academic year in which the scholarship is being announced
School/ Program Type	Apply to a two or four-year university or college as a full-time student	Apply to an accredited career/vocational/technical school as a full-time student	Apply to a two or four- year college/ university as a full-time student
GPA	Scholastic Average of a 2.0 G.P.A. on a 4.0 scale	Latest transcript of academic record with a minimum of a 2.0 G.P.A. on a 4.0 scale	Scholastic Average of a 2.5 G.P.A. on a 4.0 scale
Additional Requirements	Educational Program Participant for a minimum of two consecutive years with MCAC	N/A	N/A

*APPLICATION PROCEDURES

To be considered for a scholarship, a completed application must be forwarded to the address listed below. Applications must be postmarked by **March 14, 2022**. Applications and/or supplemental documents received after the postmarked date **will not** be considered.

Delta Sigma Theta Sorority, Inc. Montgomery County (MD) Alumnae Chapter Attn: Chantal Fremont, Chair Scholarship Committee P.O. Box 4236 Silver Spring, Maryland 20914-4236

Your completed application package **must** include the following:

1. Scholarship Application Form

Please note, the application form must be signed and dated by both the applicant and parent or quardian.

- 2. Letters of Recommendation
 - (a) A letter of recommendation must be written by a teacher or counselor at your school. The letter must be on school letterhead and include the length of time the teacher or counselor has known the student applicant and in what capacity. Please include comments regarding the intellectual ability, maturity, motivation, interpersonal skills, and verbal and writing skills. Also, include contact information for the teacher or counselor.
 - If applying for the MCAC Educational Program Scholarship, a letter must be written by the Chair/or official leadership of the MCAC Educational Program in which you participated.
 - (b) A letter of recommendation must be written from a community service organization where the applicant volunteered or an individual of the selected career/vocational/ technical school. The letter must be on the organization's letterhead and must be signed by an official. The letter must demonstrate active involvement to benefit the organization and/or community. Please do not list church activities common to all churches such as Sunday school teacher or 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 is required or an official General Education (GED) Diploma 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. Materials may also be submitted from an official school email account to scholarship@mcacdst.org.

- 4. A thoughtful essay must be written by the applicant to address the topics below; two separate 300-500 word essays must be submitted.
 - (a) Community Service Essay
 - Y Explain your involvement in community service work. How has your community involvement helped to shape your aspirations?
 - (b) Personal Essay
 - Y **County-wide Scholarship Applicant:** Explain a personal experience that has had a significant Impact on your academic life.
 - Y **MCAC Educational Program Scholarship Applicant:** Explain the personal impact of the MCAC Educational Program on your academic enrichment.
 - Y *Career/Vocational/Technical Scholarship Applicant:* Explain your career goals and what has influenced your career path.

Please note, the essays <u>must be typed</u> and will be evaluated based on content, grammar, and presentation.

- 5. Submit a color photograph (ex. wallet size senior picture). The photograph will be used to identify the applicant.
 - Y Include your name on the back of your photograph.
 - Y Provide a signature in the **Photo Release** section of this application to approve use of the photograph, if selected, in the MCAC announcement of scholarship winners and featured in the scholarship brochure.

Please note all information in the application is confidential. Once submitted, the application becomes the property of the Montgomery County (MD) Alumnae Chapter of Delta Sigma Theta Sorority, Inc.

The Scholarship Committee will review all completed applications mailed to the address listed below by the postmarked date of **March 14, 2022**. Applicants selected to continue in the selection process will receive correspondence from the Montgomery County (MD) Alumnae Chapter of Delta Sigma Theta Sorority, Inc. In addition, application scholarship finalists **must** participate in an interview to receive further consideration.

If there are any questions or concerns, please contact the Scholarship Committee via email: scholarship@mcacdst.org or by phone: (240) 491-0275.

Last Edited: September 2021

Delta Sigma Theta Sorority, Inc. Montgomery County (MD) Alumnae Chapter Attn: Chantal Fremont, Chair Scholarship Committee P.O. Box 4236 Silver Spring, Maryland 20914-4236

STUDENT APPLICANT SECTION

PERSONAL INFORMATION (please print or type)Please complete all information on this page.

Name of Student (Last, First, Middle In	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
GED Graduation Date (MM/DD/YY)		Cumulative GPA

SCHOLARSHIP SELECTION (please select one or more) County-Wide Scholarship MCAC Educational Program Scholarship Career/Vocational/Technical Scholarship COUNTY-WIDE/ MCAC EDUCATIONAL PROGRAM SCHOLARSHIP APPLICANTS COLLEGE/UNIVERSITY (List all Colleges/Universities 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 CAREER/VOCATIONAL/TECHNICAL SCHOLARSHIP APPLICANTS CAREER/VOCATIONAL/TECHNICAL (List all Career/Vocational/Technical Career/vocational/technical Training Schools to which you have applied. Place an asterisk next to those that have accepted you.) Career/Vocational/Technical School Career/Vocational/Technical School Career/Vocational/Technical School Career/Vocational/Technical School Indicate the Career/Vocational/Technical Interest/Program Affiliation:

C	hecklist for you				
	Scholarship Application				
	Two or more Letters of Recommendation (ensure you have provided letters of recommendations that fit the type of scholarship you are applying)				
	Transcripts				
	Essays (1 Community Service & 1 Personal)				
	Individual Color Photograph				
PARENT/GUARDIAN SECTION					
As Ali the	Sthe parent/guardian of the applicant, I give permission to the Montgomery County (MD) umnae Chapter of Delta Sigma Theta Sorority, Inc. to use photographs of my child/ward in eir publications, internet website, and other promotions to educate the public and solicit apport for their programs. I will hold harmless and indemnify them from any and all liability that ay arise from the use of the photographs and for the purposes stated.				
P	Parent/Guardian Signature Date				
P	Parent/Guardian E-mail Address				
STUDENT APPLICANT and PARENT/GUARDIAN					
By of Co	ERTIFICATION y the signature below, you affirm all information you provided is true, complete (to the best your knowledge) and you are not the parent, child, or sibling of a member of the Montgomery ounty (MD) Alumnae Chapter of Delta Sigma Theta Sorority, Inc. Submission of inaccurate o complete information will result in disqualification or forfeiture of any award.				
A	pplicant Signature Date				
Pa	arent/Guardian Signature Date				

TEACHER OR COUNSELOR SECTION

*LETTER OF RECOMMENDATION

(To be completed by a teacher, counselor, community service provider, or supervisor. When providing a letter of recommendation this form of the application should also be completed.)

INSTRUCTIONS: Please complete all sections of this form in its entirety. The letter of recommendation <u>must be on the letterhead</u> of the school and/or organization, and submitted with this form. Refer to the *Application Procedures* section of this document for additional information.

Name of Applicant (Last, First, Middle Initial)					
Address					
City	State	Zip Code			
Home Telephone Number	Cell Phone Num	ber			
Do you recommend this applicant for the reason)? YES NO Not Applicable	ne Career/Vocational/Tech	hnical Scholarship (please state			
*Please return this recommendation by Section (March 14, 2022).	the postmark date identif	ied in the <i>Application Procedures</i>			
Print Name and Title		Date			
Signature					

Thank you for assisting the Scholarship Committee in recommending the above named applicant, who is applying for a scholarship from the Montgomery County (MD) Alumnae Chapter, Delta Sigma Theta Sorority, Inc. We appreciate your candid assessment of the applicant. Only the Scholarship Committee will see your comments.