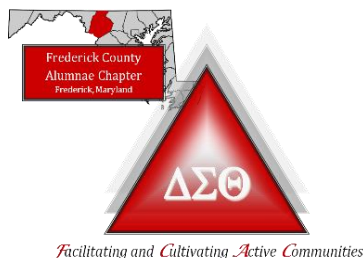


FREDERICK COUNTY ALUMNAE CHAPTER DELTA SIGMA THETA SORORITY, INC.



SCHOLARSHIPS OF EXCELLENCE APPLICATION PACKET

APPLICATION DEADLINE: MARCH 12, 2021

Submit completed application (in its original format) along with attachments, official transcript, photo and recommendations postmarked by March 12, 2021.

**MAILING ADDRESS
FREDERICK COUNTY ALUMNAE CHAPTER
DELTA SIGMA THETA SORORITY, INC.
P.O. BOX 1234
FREDERICK, MD 21702**

WWW.DSTFCACMD.ORG

*Frederick County Alumnae Chapter,
Delta Sigma Theta Sorority, Inc.
Scholarships of Excellence*

On January 13, 1913, twenty-two dynamic and visionary women founded Delta Sigma Theta Sorority, Incorporated on the campus of Howard University in Washington, D.C. Inspired by the concern for social welfare, academic excellence, and cultural enrichment, our Founders committed themselves to social consciousness and public service.

On April 17, 2004, the Frederick County Alumnae Chapter (FCAC) of Delta Sigma Theta Sorority, Incorporated was chartered at the Quinn Chapel Christian Life Center by sixteen women. Guided by the leadership of six-chapter presidents since its inception, the membership has grown to over 50 women. The sorors of this chapter unselfishly dedicate themselves to continuing the legacy of Delta Sigma Theta Sorority, Incorporated. We uphold educational development as a priority among our organization's programmatic thrust.

African American students are strongly encouraged to submit an application to be considered for one of our Scholarships of Excellence. For additional information about FCAC, visit our website at www.dstfcacmd.org.

Applications can be downloaded from the Naviance in the Guidance Office or at www.dstfcacmd.org.

Application deadline: Saturday, March 12, 2021

Notification of your selection will be made by May 1, 2021.

**** Must be postmarked by 3/12/2021 ****

Frederick County Alumnae Chapter,

Delta Sigma Theta Sorority, Inc.

P.O. Box 1234

Frederick, MD 21702

REMINDER!!!

You must provide all requested documentation.

Do not submit a resume in lieu of completing the application. Incomplete applications will not be considered.

Additional documents will not be reviewed.

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CRITERIA

To apply for and receive scholarships offered by the Frederick County Alumnae Chapter Scholarship Program, one must:

- ❖ Currently be a high school senior and resident of Frederick County.
- ❖ Attend a public, private, or parochial high school in Frederick County.
- ❖ Submit a completed application electronically or postmarked by March 12, 2021; signed by applicant and parent/guardian.
- ❖ Have an overall grade point average of at least 2.75 (based on a 4.0 non-weighted scale). Submit an official signed transcript in a separate sealed envelope if mailed.
- ❖ Two (2) letters of recommendation. One letter must be from a staff member from your high school that can speak to your character. One letter must be from someone who has supervised your involvement in a community service project referenced on your application and is not an immediate relative.
- ❖ Submit a one full-page essay to address the prompt selected.
- ❖ Submit a personal statement highlighting your community service, leadership activities, college and career goals.
- ❖ Submit supplemental materials (photo) and artifacts (certificates) from your service and leadership.
- ❖ Submit a recent color photograph (wallet size senior picture). Print name on the back of the photo.
- ❖ Enroll in a full-time program at an accredited college, university, or institution of equivalent accreditation during the 2021-2022 academic year. (If awarded a scholarship and the student takes a Gap year for 2021-22, the scholarship is forfeited).
- ❖ Participate in an interview as part of the selection process.
- ❖ Provide verification of college enrollment before receiving scholarship as a condition of award.
- ❖ Children of a member of the Frederick County Alumnae Chapter of Delta Sigma Theta Sorority, Inc., are ineligible to apply.

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FCAC Scholarships of Excellence

Personal Information (please type or print)

SECTION A—BIOGRAPHICAL INFORMATION

Last name

First Name

M.I.

Home Address

City

State

Zip Code

Home Number

Cell Number

E-mail address

High School

Address

G.P.A.

Anticipated Date of Graduation

Date of Birth

Intended College

Potential major (if known)

Have you been accepted?

Parents'/Guardians' Name(s)

Name:	Name:
Address:	Address:
City/State:	City / State:
Phone:	Phone:

Number of other dependent children in the family: _____

Of that number, how many will be enrolled in college or other schools beyond high school during the next academic year? _____

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Honors and Awards

Please provide information on any special honors or awards and year received each honor and award.

Honors and Awards (academic, athletic, community, and/or school awards)		
Award	Source of Award	Reason(s) for Award
1.		
2.		
3.		
4.		
5		

Leadership

Please provide information on extracurricular or outside activities (i.e., clubs, sports, church, etc.) in which you have participated. Identify positions of leadership in all activities and the number of years in each activity and if applicable, the number of years in leadership with that activity.

Leadership Positions					
Name of Group/Activity	Grade				Leadership Position(s) Held
	(Check boxes that apply)				
	9	10	11	12	
1.					
2					
3					
4.					
5.					

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Community Service

Please provide information on extracurricular or outside activities (i.e., clubs, sports, church, etc.) in which you have participated. Identify positions of leadership in all activities and the number of years in each activity and if applicable, the number of years in leadership with that activity.

Community Service					
Name of Community Service Activity	Grade (Check boxes that apply)				Contact Person
	9	10	11	12	
1.					
2					
3					
4.					
5.					

Type your personal statement as a separate document to upload with your application. Handwritten responses will not be accepted.

PERSONAL STATEMENT

Briefly tell us about yourself including your aspirations and how receiving this scholarship will help you achieve your goals. Limit your statement to one double-spaced, type-written page.

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ESSAY

Select one of the essay prompts below and develop an essay to fully explain the prompt as it relates to your life. Type your essay as a separate document to upload with your application. Handwritten responses will not be accepted.

Please submit a typed essay between 500-750 words in response to the following prompt:

Prompt 1: Reflect on a time when you questioned or challenged a belief or idea. What prompted your thinking? What was the outcome? Would you do it again?

Prompt 2: The lessons we've learned from challenges we encounter can be instrumental to our later success. Recount a time when you faced a challenge, obstacle, setback, or failure. How did it affect you, and what did you learn from the experience?

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Letters of Reference

References

Two letters of reference from individuals who have knowledge of your academic, extracurricular activities, character and community service must accompany this application. References must be submitted on school or business letterhead. Instruct your references to complete the reference letter on its organization's letterhead and to sign their name across the seal of the envelope. Applications without the required references will not be considered.

Relatives and friends are not acceptable.

List names of references below.

Name:
Telephone Number:
Address:
Email:

Name:
Telephone Number:
Address:
Email:

Academic Transcript

Please submit an **official** transcript. Transcript should be submitted in a sealed envelope and marked issued to student.

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Applicant Certification

I/We the undersigned, certify that the information supplied by me in this application is complete and accurate. We hereby certify that the information provided in this application is current and that the Applicant is not the child of a member of the Frederick County Alumnae Chapter of Delta Sigma Theta Sorority, Inc. We understand this application packet will be kept confidential. All materials submitted become the final property of the Frederick County Alumnae Chapter of Delta Sigma Theta Sorority, Inc. with the exception of any samples of the Applicant's work that is provided such as wall art, photography, video, class assignment, broadcast script or school newspapers, which samples will be returned upon request. We understand that the Applicant will be required to make arrangements for the return of all work samples. I agree that I must participate in a personal interview with the Scholarship Committee. I also understand that if I am selected to receive a scholarship award, the monetary award will be disbursed upon official certification of my enrollment. _____ (Initials)

I certify that I will be enrolled and matriculating in an institution of higher learning in the Fall of 2021. I will provide the documentation to support my acceptance at the institution of higher learning by July 15, 2021. If I am not enrolled by July 15, 2021, I may forfeit the scholarship award. I must initiate contact with the FCAC Scholarship Chair to discuss the relevant circumstances. There is no appeal process.

Signature of Applicant

Date

Signature of Applicant's Parent or Guardian

Date

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Media Release and Photography Form

I understand that my child may be photographed in connection with his/her application for the scholarship awards offered by the Frederick County Alumnae Chapter of Delta Sigma Theta Sorority, Inc. (the "Chapter"). I agree that if selected my name and/or photograph may be used for publicity purposes by the Frederick County Alumnae Chapter of Delta Sigma Theta Sorority, Incorporated. All information included in this application packet will be retained by the Chapter. I certify that I have read and understand the information above. _____ (Initials)

I give permission for the Chapter to publish on the Internet or media still photographs ("Images") that may be taken of my child without payment or any consideration and without notifying me. I understand and agree that these Images will become the property of the Chapter, which shall have complete ownership of the Images. I hereby irrevocably authorize the Chapter to publish or distribute these Images for the purpose of publicizing the Chapter's scholarship program or for any other lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my child's likeness appears. Additionally, I waive any rights to royalties or other compensation arising out of, or related to the use of the Images. _____ (Initials)

I/We hereby certify that I/We are the parents/guardians of _____, authorized legally to give this consent, and do hereby give my/our consent without reservation to the foregoing on behalf of my/our child. _____ (Initials)

I hereby hold harmless and release and forever discharge the Chapter and any of its officers and members; Delta Sigma Theta Sorority, Incorporated; its officers; National Executive Board; employees; members; representatives; agents; and assigns from any and all claims, costs, suits, actions, judgments, and expenses which my child, his/her heirs, representatives, executors, administrators, or any other persons acting on his/her behalf have or may have by reason of the use of the Images. This release specifically includes, without limitation, a complete release and discharge of any liability by virtue of any editing, distortion, alteration, or optical illusion, whether intentional or otherwise, that may occur or be produced in the taking of or editing of said Images, unless it can be shown that such was maliciously caused, produced and published solely for the purpose of subjecting my child to conspicuous ridicule, scandal, reproach, scorn and indignity.

Signature of Applicant's Parent or Guardian

Date

If you have any questions please contact
Mary Wright, Scholarship Chair
Scholarship.fcacmd@gmail.com