

TRACY AREA ALUMNAE CHAPTER DELTA SIGMA THETA SORORITY, INC. SCHOLARSHIP APPLICATION PACKET

To: All Tracy, Banta, Manteca, Lathrop, Mountain House, Salida, Ripon, Patterson, and French

Camp African American High School Seniors

From: Tracy Area Alumnae Chapter Scholarship Committee

Date: December 11, 2020

Re: Request for Scholarship Packet Submittal

The Tracy Area Alumnae Chapter of Delta Sigma Theta Sorority, Inc. is currently accepting scholarship applications from Tracy, Banta, Manteca, Lathrop, Mountain House, Salida, Ripon, Patterson, and French Camp high school seniors. Applicants must be of African American descent. Immediate family members of Tracy Area Deltas (members of Delta Sigma Theta Sorority, Inc.) are only eligible for the memorial scholarship.

To be considered for an interview and a potential scholarship award, *all* the following items must be postmarked by February 19, 2021 to:

Delta Sigma Theta Sorority, Inc. Tracy Area Alumnae Chapter C/O: Liz Baker P.O. Box1240 Tracy, CA95378

- 1. Scholarship application (2 pages).
- 2. An official transcript (must be received in a sealed envelope). The transcript must be embossed with the school seal. *Request official transcripts from your school as soon as possible!*
- 3. Two (2) letters of recommendation from the following:
 - a) One from church, civic or community group in which the student is/was involved.
 - b) One from a high school teacher, counselor, or principal.
- 4. A typewritten autobiographical essay. Please include your educational and professional goals with an explanation of how you plan to achieve these goals. (Essay should be at least one full page, not to exceed 500 words)
- 5. A photograph (suggested size not to exceed a 4" x 6" snapshot).

Note: If any items listed above are missing, the applicant is considered disqualified.

For more information about Delta Sigma Theta Sorority, Inc., visit our website at www.deltasigmatheta.org. Additional information about the Tracy Area Alumnae Chapter can be found at www.tracyareadeltas.com.

Eligibility Requirements

Select One of Two Scholarship Options:

Memorial Scholarship criteria: Chantay M. Murray Scholarship

- A relative of a Tracy Area Alumnae Chapter member
- High School Senior accepted for admission in a two or four-year degree granting college/university
- Field of study in Human Services (i.e. Social Work, Social Welfare, Psychology, Sociology, Behavioral Sciences)
- Demonstrate community volunteerism within your school or community
- A minimum cumulative grade point average (GPA) of 2.75

General Scholarship criteria:

- A resident of Tracy, Banta, Manteca, Lathrop, Mountain House, Salida, Ripon, Patterson, and French Camp
- High School Senior accepted for admission in a two or four-year degree granting college/university
- Demonstrate community volunteerism within your school or community
- A minimum cumulative grade point average (GPA) of 2.75
- **<u>Delta Membership</u>: A member is a Soror who is in good standing with the Tracy Area Alumnae Chapter
- ** <u>Relative:</u> Relative is defined as immediate family members, including legally adopted child or person for which you serve as legal guardian, including foster children, stepchildren, parents, grandparent(s), brothers, sisters, daughters, sons, nieces, nephews

SCHOLARSHIP APPLICATION Deadline: Friday, February 19, 2021

(Please print legibly in pen or type information)

Applicant's Full Name			
Address			
City, State, Zip			
Phone #			
Applicant living with (check one): Both Parents Father	Mother		
Mother's or Guardian's Name		Occupation	
Father's or Guardian's Name		Occupation	
Other dependent sisters or brothers l	iving at hon	ne or in college:	
Name	Age		Grade/Year
(Use additional paper if necessary)			
Are there any unusual family circum additional paper if necessary.	nstances that	should be considered?	Explain and use

EDUCATIONAL AND OTHER INFORMATION

Applicant's l	Full Name			
Name of Hig	gh School			
What is your	cumulative grade point a	verage?		
(Minimum required: 2.75 on a 4.0 scale and 3.75 on a 5.0 scale)				
Are you appl	lying to a two or four-yea	r university/college?		
Circle one:	2 year 4 year Nam	e of college(s)		
Activities Av	wards and/or Honors:			
High School	Activities:			
Community	and/or Church Service A	ctivities:		
List names a	nd amount of scholarship	s awarded to you:		
	plied for scholarships wit which chapters?	h any other Chapters of Delta Sigma Theta Sorority,		
Included in my pac	ket are (check each): Application	orority, Inc., Tracy Area Alumnae Chapter P.O. Box 1240, Tracy, CA 95378 Transcript Letters of Recommendation (2) Essay DELTA SIGMA THETA SORORITY, INC ONLY:		
Rejected	Reason for rejection:	Date returned:		