

Greater Cleveland Alumnae Chapter

Delta Sigma Theta Sorority, Inc. *A Public Service Sorority* P.O Box 221368 BEACHWOOD, OHIO 44122



Ruth Price Rollins President

Melonie M. Frazier 1st Vice President

Cheri Coleman-Daniels 2nd Vice President

Xaviera Patrick Recording Secretary

Sherelle L. Tucker Corresponding Secretary

Daina White Financial Secretary I

Teresita Jones-Thomas

Financial Secretary II

Maia Ward

Treasurer

February 12, 2022

Greetings Scholarship Applicant:

Delta Sigma Theta Sorority, Incorporated is a private, nonprofit organization whose purpose is to provide services and programs to promote human welfare. The sorority has more than 1000 collegiate and alumnae chapters in the United States and worldwide. Delta Sigma Theta's five Point Programmatic Thrust - Economic Development, Educational Development, International Awareness and Involvement, Physical and Mental Health, and PoliticalAwareness and Involvement provides the framework which serves the community.

As part of our Educational Development Program, the Greater Cleveland Alumnae Chapter of Delta Sigma Theta Sorority, Inc. awards scholarships to support high school, college-bound seniors with post-secondary education financing.

In order to qualify for the scholarship, students [female or male] must meet the eligibility criteria:

- Reside and attend a high school in Cuyahoga County (Ohio)
- Financial need
- Have a 2.75 GPA (cumulative) or better on a 4.0 scale
- Community service, not limited to, but including, leadership, athletics, fine arts, and student government
- Applicant must plan to attend an accredited college, university, or post-secondary institution
- Applicant must attend an interview with the GCAC Scholarship Committee of Delta Sigma Theta Sorority, Inc.

To apply:

- Click on the Scholarship link and download the application: dstcleveland.org/scholarship
- <u>FULLY COMPLETE</u> the scholarship application which includes recommendations [counselor,school official and community person]
- Complete required essay
- Provide FAFSA profile or Student Aide Report (SAR)
- Provide High school transcript
 An official transcript is not required if the transcript is generated

the school system. If the school requires the transcript to be mailed from the school system, please allow sufficient time to request the transcript to ensure it is received by the deadline

Mail transcript to: Greater Cleveland Alumnae Chapter Delta Sigma Theta Sorority, Inc. PO Box 221368 Beachwood, Ohio 44122 ATTN: Scholarship Committee

All applicants are evaluated based on the following:

- A fully completed application
- Recommendations
- Transcript
- FAFSA documentation
- An applicant interview

These items are used to determine academic performance, financial need, and community involvement. The student and parent must review and sign the application.

Relatives of members of Greater Cleveland Alumnae Chapter are NOT eligible to apply for chapter scholarships

DEADLINE

Completed application packets must include all required documents and must be electronically submitted by 5:00 p.m. on Friday, April 22, 2022.

Email: scholarship@dstcleveland.org

If you have questions, please email scholarship@dstcleveland.org

Sincerely yours,

Gail Reese Chair, Scholarship Committee Adina Walker Co-chair, Scholarship



Greater Cleveland Alumnae Chapter Delta Sigma Theta Sorority, Incorporated

Ruth Price Rollins, President

DELTA SIGMA THETA SORORITY, INC. A PUBLIC SERVICE SORORITY FOUNDED IN 1913 GREATER CLEVELAND ALUMNAE CHAPTER				
INCOMPLE	TE APPLICATIONS WILL NOT BE CONSIDERED			
Schola	arship Applying for (choose no more than two)			
High Academic AchievementHBCU Community College OR Vocational/Trade School				
PERSONAL INFORMATION APPLICANT NAME PHONE NUMBER:	(CELL)			
PRIMARY ADDRESS				
EMAIL ADDRESSS				
PARENT OR GUARDIAN'S NAME	PARENT OR GUARDIAN'S NAME			
OCCUPATION	OCCUPATION			
ANNUAL INCOME	ANNUAL INCOME			

STUDENT LIVES WITH

FATHER	MOTHER	MALE GUARDIAN	FEMALE GUARDIAN	
OTHER (please	specify)			
EDUCATION	_			
NAME OF HI	IGH SCHOOL			
SCHOOL ADE	DRESS			
PRINCIPAL'S N	JAME			
GUIDANCE CO	UNSELOR'S NAME			
DATE OF GRADU	ATION	CUMULATIVE GR/	ADE POINT AVERAGE	

INTERESTS AND ACTIVITIES

SCHOOL CLUBS AND ACTIVITIES
HOBBIES AND SPECIAL INTERESTS:
WORK EXPERIENCE
COMMUNITY AND VOLUNTEER INVOLVEMENT

COLLEGE INFORMATION

COLLEGES TO WHICH YOU HAVE APPLIED Please list in order of preference PLACE AN ASTERISK (*) IN FRONT OF THE COLLEGES FROM WHICH YOU HAVE RECEIVED A LETTER OF ACCEPTANCE

WHY SHOULD YOU RECEIVE THIS SCHOLARSHIP? (100-no more than 200 words)

ESSAY

(Limit to 500 words; PLEASE TYPE and attach)

Please choose one of the following topics to write about:

- My community has contributed to my success by....
- My community needs me because...
- "It takes a village to raise a child" How has this statement impacted your life?

(You may include but are not limited to including educational experiences, honors, community involvement, special skills, biographical information and/or financial need)

SCHOOL RECOMMENDATION

(Must be completed by some representative from your school to be considered for scholarship i.e principal, guidance counselor, teacher or faculty member)

COMMUNITY SUPPORT RECOMMENDATION

(Must be completed by a member of your community to be considered for scholarship) STUDENT SIGNATURE DATE

PARENT/GUARDIAN SIGNATURE

DATE