

Greetings Scholarship Applicant:

Delta Sigma Theta Sorority, Inc. is a private, nonprofit organization whose purpose is to provide services and programs to promote human welfare. The sorority has more than 900 collegiate and alumnae chapters in the United States and worldwide. Delta Sigma Theta's 5-Point Program Thrust - Economic Development, Educational Development, International Awareness and Involvement, Physical and Mental Health, and Political Awareness 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, Incorporated annually award scholarships to support high school, college-bound seniors with post-secondary education financing.

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

- financial need
- academic achievement
- community service, outstanding accomplishments not limited to, but including, leadership, athletics, fine arts, and student government.
- Applicants must plan to attend an accredited college, university, or post-secondary institution.

To apply:

- Click on the Scholarship link and download the application: [dstcleveland.org/scholarship](http://dstcleveland.org/scholarship)
- **FULLY COMPLETE** the scholarship application which includes recommendations [BOTH school official and community person]
- Complete required essay
- FAFSA profile or Student Aide Report (SAR)
- High school transcript. An official transcript is not required if the transcript is generated from 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 to:  
Greater Cleveland Alumnae Chapter  
Delta Sigma Theta Sorority,  
Inc. PO Box 221368  
Beachwood, Ohio 44122  
ATTN: Scholarship COMMITTEE

Submit completed application and supplemental documents online to: [scholarship@dstcleveland.org](mailto:scholarship@dstcleveland.org)

Application and supplemental documents must be **received no later than 5:00 p.m. on Saturday, April 3, 2021.**

*Please note that only fully complete applications with all requisite information [recommendations, FAFSA, transcript] will be accepted and reviewed. The student and parent must sign the application.*

If you have questions, please email [scholarship@dstcleveland.org](mailto:scholarship@dstcleveland.org) or call: Gail Reese at 216.469.9417 or Adina Walker at 847.280.0222.

**\*\*Children of members of Delta Sigma Theta Sorority, Inc. ARE NOT eligible for this scholarship\*\***

Sincerely yours,

Gail Reese & Adina Walker,

**Co-Chairs, Scholarship Committee**





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

**SCHOLARSHIP APPLICATION**

PLEASE PRINT OR TYPE ALL INFORMATION REQUESTED.  
ANSWER ALL QUESTIONS  
INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

*Scholarship Applying for (choose no more than two)*

\_\_\_ High Academic Achievement \_\_\_ HBCU \_\_\_ Community College OR Vocational/Trade School

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**PERSONAL INFORMATION**

APPLICANT NAME \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ (CELL)

PRIMARY ADDRESS \_\_\_\_\_  
\_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

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)*

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**EDUCATION**

NAME OF HIGH SCHOOL \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

PRINCIPAL'S NAME \_\_\_\_\_

GUIDANCE COOUNSELOR'S NAME \_\_\_\_\_

DATE OF GRADUATION \_\_\_\_\_ CUMULATIVE GRADE POINT AVERAGE \_\_\_\_\_

**INTERESTS AND ACTIVITIES**

SCHOOL CLUBS AND ACTIVITIES \_\_\_\_\_

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HOBBIES AND SPECIAL INTERESTS: \_\_\_\_\_

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WORK EXPERIENCE \_\_\_\_\_

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COMMUNITY AND VOLUNTEER INVOLVEMENT \_\_\_\_\_

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**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

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PLANNED MAJOR \_\_\_\_\_

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INTENDED OCCUPATION \_\_\_\_\_

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

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## **ESSAY**

(Limit to 500 words; PLEASE TYPE)

*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

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PARENT/GUARDIAN SIGNATURE

DATE

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**\*\* MUST HAVE BOTH SIGNATURES TO BE CONSIDERED FOR SCHOLARSHIP**

**PLEASE ATTACH THE FOLLOWING:**

1. SCHOOL AND COMMUNITY RECOMMENDATIONS
2. OFFICIAL TRANSCRIPT WITH SCHOOL'S SEAL (INCLUDING OGT/OST SCORES)
3. COPY OF YOUR FEDERAL APPLICATION FOR STUDENT AID (FAFSA)

***Application and supplemental documents must be received no later than 5:00 p.m. on Saturday, April 3, 2021.***