

**WASHINGTON DC ALUMNAE CHAPTER  
DELTA SIGMA THETA SORORITY, INC.**



DELTA SIGMA THETA  
WASHINGTON DC  
ALUMNAE CHAPTER

**2017 SCHOLARSHIP APPLICATION**

**Application Deadline:  
Application package must be RECEIVED by  
March 11, 2017**

[www.wdcac.org](http://www.wdcac.org)

## APPLICATION PROCEDURES

The applicant must meet the following criteria in order to be eligible for a scholarship:

- Must be a resident of Washington, D.C.;
- Must attend a Washington, D.C. public, private, charter, or parochial high school;<sup>1</sup>
- Must be a high school senior graduating in 2017;
- Plan to enter an accredited two or four-year university or college as a full-time freshman in the Fall of 2017; and
- Is not an immediate relative, *i.e.*, child, of a member of Washington DC Alumnae Chapter, Delta Sigma Theta Sorority, Inc.<sup>2</sup>

The following documents **MUST** be attached to your completed application form:

- ☐ **Official High School Transcript.** The transcript must include the following:
  - (1) Cite the applicant's cumulative grade point average,
  - (2) Signed by a school official,
  - (3) Stamped with the official school seal, and
  - (4) Must be in a separate, **sealed** envelope within the application package.

*Schools should provide an explanation of grading system on official school letterhead if not following 4.0 grading scale.*

- ☐ **Test Scores.** Copy of **official** ACT or SAT scores, provided as follow:
  - (1) Applicant is responsible for ensuring that scores of SAT Tests taken prior to March 2016 are converted to the new SAT scoring prior to the submission of official SAT Scores with Application [Insert link to College Board's SAT converter at <https://collegereadiness.collegeboard.org/sat/scores/understanding-scores/sat-score-converter>];
  - (2) The scores must be in an envelope **sealed** by a school official; and
  - (3) The sealed envelope **must include** the official's signature or the school stamp across the sealed portion of the envelope.

*SAT scores prior to March 2016 that are not converted to the new SAT score format will not be accepted. Online score reports printed from websites must be in an envelope sealed and signed by a school official. PSAT scores also will not be accepted.*

<sup>1</sup> For purposes of this application, the term "private schools" includes home schooling located in the District of Columbia that operates in accordance with the D.C. Home Schooling Program administered by the D.C. Office of the State Superintendent of Education

<sup>2</sup> Students may be eligible for the scholarship program administered by the Federal City Alumnae Chapter of Delta Sigma Theta Sorority, Inc. For more information, see FCAC's website at <https://www.thefcadst.org/educational-development>.

- **School Recommendation.** One signed letter of recommendation from applicant's current high school principal, counselor, or major academic teacher/advisor:
  - (1) Highlighting the applicant's academic achievements, personal characteristics and leadership ability/skills;
  - (2) Indicating the length of time the high school principal, counselor, or major academic teacher/advisor has known the applicant and in what capacity;
  - (3) Written on school's official letterhead ;
  - (4) Contain the **original signature (no photocopied or electronic signatures, please)** of the person writing the recommendation; and
  - (5) Provided with the application in a **sealed** envelope with the original signature of the person writing the recommendation or the school stamp across the sealed portion of the envelope.
  
- **Community Service Recommendation.** One signed letter of recommendation from an official or authorized representative of an organization verifying applicant's current community service involvement. The recommendation should:
  - (1) Specify the relationship or capacity in which the official or authorized representative knows or has observed the applicant, and how long this person has known the applicant,
  - (2) Explain the applicant's involvement in the organization, *i.e.*, current and past duties, roles and responsibilities, and the number of total hours earned,
  - (3) Address the applicant's demonstrated leadership ability/skills, and
  - (4) Explain what the organization gained through the applicant's involvement with the organization.

*The Community Service Recommendation Letter must be on the organization's official letterhead, and contain the **original signature (no photocopied or electronic signatures)** of the official or authorized representative of the organization. **Unsigned letters will not be accepted, and the application package will be deemed incomplete.***

- **Autobiographic Essay.** One page, **typed** autobiographic essay including:
  - (1) proposed academic/career goals,
  - (2) community service involvement,
  - (3) a statement of why the scholarship is important to you, and
  - (4) the expected benefit to be derived if you receive a scholarship.
  
- **Signatures.** Scholarship application must be signed by both the student and a parent/legal guardian. (**Original signatures required. Photocopied or electronic signatures will not be accepted, and application will be deemed incomplete.**)

*A completed 2017 WDCAC Scholarship Application Form along with the six items listed above **MUST** be submitted as one complete application package. **If any items are omitted or the application (including the Autobiographic Essay) is not typed, the application will be deemed incomplete and will not be considered.** Incomplete packages will not be returned. All information provided is considered confidential. All materials become the property of the Washington DC Alumnae Chapter, Delta Sigma Theta Sorority, Inc.*

**MAIL COMPLETED APPLICATION PACKAGE TO:**

**Washington DC Alumnae Chapter  
Delta Sigma Theta Sorority, Inc.  
P.O. Box 90202  
Washington, DC 20090-0202  
ATTENTION: Scholarship Committee**

**APPLICATION DEADLINE**  
**Application package must be RECEIVED by**  
**March 11, 2017**

**For questions regarding the application process contact:**

**Andrea Williams, Chair, Scholarship Committee**  
**[scholarship@wdcac.org](mailto:scholarship@wdcac.org)**  
**(202) 255-6810**

**Washington DC Alumnae Chapter  
Delta Sigma Theta Sorority, Inc.  
2017 SCHOLARSHIP APPLICATION**

**The entire application form MUST be typed  
(Electronic copy available on chapter website: [www.wdcac.org](http://www.wdcac.org))**

**APPLICANT INFORMATION**

Name: \_\_\_\_\_  
Last First MI

Date of Birth: \_\_\_\_\_

Gender:       Male                               Female

Home Address: \_\_\_\_\_  
Street Address/Apt. Number

\_\_\_\_\_

City/State/Zip Code

Home Phone: \_\_\_\_\_  
Area Code/Number

Cellular Phone: \_\_\_\_\_  
Area Code/Number

E-Mail Address: \_\_\_\_\_

**SCHOOL INFORMATION**

Name of High School: \_\_\_\_\_

School Address: \_\_\_\_\_  
Address City, State, & Zip Code

School Phone Number: \_\_\_\_\_

Counselor's Name: \_\_\_\_\_

Expected Date of Graduation \_\_\_\_\_ Cumulative GPA \_\_\_\_\_

Community Service Hours Required to Graduate: \_\_\_\_\_

Community Service Hours Completed as of 12/31/2016: \_\_\_\_\_

**FAMILY INFORMATION**

Name of Mother/Female Legal Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

(Street Address, Apt. Number)

(City/State/Zip Code)

Home Phone: \_\_\_\_\_

Area Code/Number

Work Phone: \_\_\_\_\_

Area Code/Number

Cell Phone: \_\_\_\_\_

Area Code/Number

E-Mail Address: \_\_\_\_\_

Name of Father/Male Legal Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

(Street Address, Apt. Number)

(City/State/Zip Code)

Home Phone: \_\_\_\_\_

Area Code/Number

Work Phone: \_\_\_\_\_

Area Code/Number

Cell Phone: \_\_\_\_\_

Area Code/Number

E-Mail Address: \_\_\_\_\_

**HONORS AND AWARDS**

List all honors and awards received during high school. Please include a description of the honor(s)/award(s) and date(s) received. (Use additional sheets as needed.)

**Honors/Awards**

**Date Received**

_____	_____
_____	_____
_____	_____
_____	_____

**PLEASE TYPE ALL INFORMATION**

**EXTRACURRICULAR ACTIVITIES**

List all extracurricular activities (school and community), including academic related internships and work-study jobs, that you have participated in during high school. Please include a brief description of the activities, position(s) held, duties and dates involved. (Use additional sheets as needed.)

<b>Activity</b>	<b>Position Held/Duties*</b>	<b>Dates (To/From)</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\*List leadership positions held, if any.

**COLLEGE INFORMATION**

List the colleges/universities to which you have applied for fall admission. (Use additional sheets as needed)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Proposed Major or Career Interest: \_\_\_\_\_

**PLEASE TYPE ALL INFORMATION**

## CERTIFICATIONS

Please indicate by your signatures (**original signatures only**) below that you certify that the statements are correct.

1. I certify that all information provided is correct and complete to the best of my knowledge. I give the Washington DC Alumnae Chapter, Delta Sigma Theta Sorority, Incorporated permission to verify any information contained in my information package, as necessary. I understand that misrepresentation of any information or the submission of inaccurate or incomplete information will result in disqualification to be considered for a scholarship or forfeiture of any award that I may receive.

2. I certify that the applicant is: *(please check all that apply)*

- a resident of Washington, DC
- a student attending a Washington, DC public, private, charter, or parochial high school
- a high school senior graduating in 2017
- not an immediate relative, *i.e.*, child, of a member of Washington DC Alumnae Chapter, Delta Sigma Theta Sorority, Inc.

3. I understand that if the applicant is awarded a scholarship, the funds will be made payable to the applicant and his/her college/university and will be sent directly to the college/university once the proper verification forms have been completed and returned to the Washington DC Alumnae Chapter, Delta Sigma Theta Sorority, Incorporated.

4. I hereby grant the Washington DC Alumnae Chapter, Delta Sigma Theta Sorority, Incorporated the unrestricted right and permission to use and re-use my name and likeness in any and all publications, including photograph, television broadcast, video recording, internet sites, audio-recording or any other form of electronic or print communication (the Promotional Materials), for its own purposes without payment or any other consideration to me, in perpetuity. I understand and agree that any material produced using my likeness is the property of WDCAC.

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Applicant Signature

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Date

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Parent/Legal Guardian Signature

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Date