



Houston Alumnae Chapter Delta Sigma Theta Sorority, Inc.

2019 SCHOLARSHIP APPLICATION ~ Undergraduate Applicants ~

Applicant's Information

Name _____

Current/Local Mailing Address _____

City _____ State _____ Zip Code _____

Telephone (Home) _____ (Cell) _____

School Email _____

Permanent Mailing Address _____

City _____ State _____ Zip Code _____

Personal Email Address _____

Education

Name of your college/university? _____

Classification? _____ GPA _____

Major? _____

Expected graduation date? _____

Sorority Membership Verification

Are you a member of Delta Sigma Theta Sorority, Inc.? Yes _____ No _____

If yes, what is your member number? _____

Chapter/year of initiation? _____

Name of the college/university where you were initiated? _____



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Leadership, Volunteer & Academic Activities

(do not include high school activities)

List honors and awards received. Please include attachments, if additional space is needed.

Name of Award/Honor	Month/Yr. of Award

List school organizations and community activities (mentoring, volunteering, etc.) in which you have been actively involved, and any leadership positions held (President, Secretary, Member, etc.). Please include attachments, if additional space is needed.

Organization/Activity Name	Position Held

Work Experience

List jobs you have held since entering college. Include part-time jobs, campus work-study jobs, summer internships as well as full-time positions. Please include attachments, if additional space is needed.

Employer	Position	Dates (mo/yr – mo/yr)



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Scholarship Award Distribution

If selected to receive a scholarship award, checks will be sent to your school. Please provide the mailing address for your scholarship payment check so that funds can be applied to your student account.

College/University Name _____

Student ID No. _____

Mailing Address _____

City _____ State _____ Zip Code _____

Information Verification

Signature: _____ Date: _____

I certify that all information contained herein is accurate and complete to the best of my knowledge. Submitting false & inaccurate information could lead to forfeiture of your scholarship award.

Mail your completed applications to the following address:

Delta Sigma Theta Sorority, Inc., Scholarship & Awards Committee, P.O. Box 2642, Houston, TX 77252-2642

All application packets must be POSTMARKED by March 4, 2019

Questions?

Questions may be sent to: scholar@dsthoustonalumnae.org

Scholarship Application Checklist:

- Completed Application
- Letter of Recommendation: School Professor/Official
- Letter of Recommendation: Community Leader
- Wallet-size Photo (appropriate for business)
- Essay
- Official Transcript
- Additional Attachments