



# Delta Sigma Theta Sorority, Inc.

## *Long Beach Alumnae Chapter*

committed to serving the greater Long Beach community since 1986

### 2014-15 Scholarship Application

Greetings!

Delta Sigma Theta Sorority, Incorporated is a private, non-profit organization whose purpose is to provide assistance and support through established programs in local communities throughout the world. The sorority has a membership of over 200,000 predominately African American, college educated women. The sorority currently has 900 plus chapters located in the United States, Tokyo, Okinawa, Germany, Bermuda, the Bahamas, Seoul Korea, St. Thomas and St. Croix in the U.S. Virgin Islands. Since the founding in 1913, Delta Sigma Theta Sorority, Incorporated has established itself as a public service organization that strives to confront the problems primarily of African Americans thereby benefitting the global community. A wide range of programs addressing education, health, international development, and strengthening the African American family emerged and evolved over the years.

The Long Beach Alumnae Chapter of Delta Sigma Theta Sorority, Incorporated serves the greater Long Beach area of Long Beach, Lakewood, Signal Hill, Paramount, Seal Beach, Bellflower and Los Alamitos. Our endeavors address the sorority's Five-Point Programmatic Thrust: Economic Development, Educational Development, International Awareness and Involvement, Physical and Mental Health, and Political Awareness and Involvement.

The chapter's programs include our annual scholarships awarded to local high school students, the Dr. Betty Shabazz Delta Academy, annual holiday drives including the Thanksgiving Basket program and Christmas Toy Drive. We continue to develop and expand our relationship with the African American Infant Health Program, Carmelitos Housing Community, Barton Elementary School, NAACP and other programs throughout the Long Beach area.

Each year the Long Beach Alumnae Chapter awards academic scholarships to graduating students in the Long Beach Alumnae service area (listed above). Applications are based on financial need, grade point average, and school/community involvement.

Thank you for your interest in the Delta Sigma Theta Sorority, Inc., Long Beach Alumnae Chapter's Scholarship. All applicants must submit a **completed** application packet including essay, letters of recommendations and photograph no later than **January 31, 2015**.

Sincerely,

Claressa Spencer  
President

### **SCHOLARSHIP INFORMATION**

Scholarships are focused on assisting African American high school seniors or a community college student in the Long Beach Alumnae Service area who will enter an accredited four-year college/university in the fall 2015 semester. One scholarship will be awarded in honor of charter member, Martha Dauway, to the eligible recipient that has demonstrated a high level of community service.

### **ELIGIBILITY**

An applicant should:

1. Attend a high school in Long Beach Unified School District (LBUSD), Long Beach, Lakewood, Signal Hill, Paramount, Seal Beach, Bellflower or Los Alamitos **OR**
2. Be a community college student transferring to an accredited four-year college/university in the Fall 2015 semester **OR**
3. Be an active participant in the Long Beach Alumnae Chapter educational programs including: Delta G.E.M.S. or E.M.B.O.D.I.
4. Have at least a B (3.0) grade point average on a four-point (4.0) scale.
5. Show need of financial assistance to continue his/her education.

### **APPLICATION PROCEDURES**

The applicant must complete and submit all of the following:

1. The scholarship application with photograph (passport or wallet size photo only)
2. An official copy of his/her high school transcript – including Fall 2014 semester grades
3. Two-page autobiographical statement (typed on 8 ½ X 11 paper, no more than two pages)
4. Two (2) recent letters of recommendation on organizational letterhead– one (1) must be from school personnel (department head, counselor, teacher, or administrator), and one (1) from a religious or civic leader, employer, or volunteer supervisor who will speak to the character of the applicant.

### **DEADLINE**

ENTRIES MUST BE MAILED AND RECEIVED NO LATER THAN **JANUARY 31, 2015 TO:**

**DELTA SIGMA THETA SORORITY, INC.**

**Long Beach Alumnae Chapter**

**ATTN: Scholarship Committee**

**P.O. Box 91623**

**Long Beach, CA 90809-1623**

### **SELECTION OF RECIPIENTS**

1. Recipients will be selected by the Scholarship Committee on or before March 1, 2015. Selection will be based on the applicant's written application, letters of recommendation and financial need.
2. If selected, recipients must attend the Long Beach Alumnae Scholarship Breakfast on Saturday, March 21, 2015.
3. Scholarship money is released after official proof of registration in a four (4) year College/University is provided (no later than October 31, 2015).

We thank you for your interest in the Delta Sigma Theta Sorority, Inc., Long Beach Alumnae Chapter's Scholarship. If you need additional information, please contact Simona Hollins at (844) 378-5222 ext. 2205 or by email [scholarships@lbadst.org](mailto:scholarships@lbadst.org).

**DELTA SIGMA THETA SORORITY, INC.  
LONG BEACH ALUMNAE CHAPTER  
SCHOLARSHIP APPLICATION**

**PERSONAL INFORMATION**

*Please provide the following information (type or print legibly).*

Name \_\_\_\_\_ Sex \_\_\_\_\_

High School \_\_\_\_\_ Date of Graduation \_\_\_\_\_

Address, City, Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Alternate Telephone Number \_\_\_\_\_

Date of Birth \_\_\_\_\_ Email Address \_\_\_\_\_

**Parent/Guardian Information:**

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Occupation \_\_\_\_\_

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Occupation \_\_\_\_\_

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**ADDITIONAL INFORMATION**

*Please use a separate sheet if necessary.*

List your extracurricular activities. Identify any leadership roles you may have held.

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List your community service and/or volunteer activities.

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What is your employment experience?

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What additional information would you like us to consider about you when reviewing your application?

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## ESSAY

*On a separate sheet of paper, answer the following question.*

**Please type and attach to your application an autobiographical statement that includes your volunteer experience, college and career goals, how this scholarship will help you and any special circumstances. The statement should be no more than two pages. (*Double Space, Font size 12, Times New Roman only*).**

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## COLLEGE/UNIVERSITY INFORMATION

*Please provide the following information.*

College/University \_\_\_\_\_

Have you been accepted to attend? ☐ Yes ☐ No

Intended field of study \_\_\_\_\_

College/University \_\_\_\_\_

Have you been accepted to attend? ☐ Yes ☐ No

Intended field of study \_\_\_\_\_

College/University \_\_\_\_\_

Have you been accepted to attend? ☐ Yes ☐ No

Intended field of study \_\_\_\_\_

What do you anticipate your financial need will be for the academic year? Please include estimates on room, board, tuition, fees, etc. \_\_\_\_\_

What other financial assistance do you anticipate (i.e. family, student loans, grants, scholarships, etc.)? \_\_\_\_\_

## FINANCIAL NEED

List dependent children living at home and their respective ages:

Name(s)	Age(s)
_____	_____
_____	_____
_____	_____

List siblings who presently attend a college/university:

Name(s)	College/University
_____	_____
_____	_____
_____	_____

What is your family's estimated gross income?

Income should include employment, SSI, FIA, Alimony, Child Support, Disability, other

More than \$0 – but less than	\$ 15,000	<input type="checkbox"/>
More than 15,001 but less than	\$ 30,000	<input type="checkbox"/>
More than 30,001 but less than	\$ 50,000	<input type="checkbox"/>
More than 50,001 but less than	\$ 75,000	<input type="checkbox"/>
More than 75,001 but less than	\$100,000	<input type="checkbox"/>
Greater than	\$100,001	<input type="checkbox"/>

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## REFERENCES

Two (2) recent letters of recommendation on organizational letterhead– one (1) must be from school personnel (department head, counselor, teacher, or administrator) and one (1) from a religious or civic leader, employer, or volunteer supervisor, who will speak to the character of the applicant.

Name \_\_\_\_\_ Occupation \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

Email Address \_\_\_\_\_

Name \_\_\_\_\_ Occupation \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

Email Address \_\_\_\_\_

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## STATEMENT OF TRUTH AND AUTHORIZATION

*I affirm that the information provided by me in this application is truthful and accurate to the best of my knowledge. Any information determined to be incorrect or untruthful can influence the status of my application and may disqualify me from the Long Beach Alumnae Chapter of Delta Sigma Theta Sorority, Inc. scholarship process.*

*I also understand that if I am chosen as a recipient of the Delta Sigma Theta Sorority, Inc., Long Beach Alumnae Chapter Scholarship I must provide evidence of enrollment and registration at an accredited, higher education institution before scholarship monies can be awarded. I also understand that failure to do so by the deadline date of October 31, 2015 may forfeit my scholarship award.*

*I give the Long Beach Alumnae Chapter of Delta Sigma Theta Sorority, Inc. permission to use my photo as a promotion and/or in program brochures to advertise its scholarship program.*

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

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## APPLICATION CHECKLIST

*All of the following are included in my scholarship application packet:*

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|--------------------------|---|
| <input type="checkbox"/> | 1) Completed application  |
| <input type="checkbox"/> | 2) Essay (two-pages; double spaced)   |
| <input type="checkbox"/> | 3) Two (2) Letters of Reference <ul style="list-style-type: none"><li>• One <u>must</u> be from school personnel</li><li>• One <u>must</u> be from religious or civic leader, employer, or volunteer supervisor</li></ul> |
| <input type="checkbox"/> | 4) Transcript   |
| <input type="checkbox"/> | 5) Passport or Wallet size picture (attached below)   |
| <input type="checkbox"/> | 6) Current college/university letter of enrollment (if you are a mid-year high school graduate or a transferring community college student)   |

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*If you have additional questions or need additional information, please contact Simona Hollins at (844) 378-5222 ext. 2205 or by email [scholarships@lbadst.org](mailto:scholarships@lbadst.org).*

***Application packet must be mailed to:***

**DELTA SIGMA THETA SORORITY, INC.  
LONG BEACH ALUMNAE CHAPTER  
Scholarship Committee  
P.O. Box 91623  
Long Beach, CA 90809-1623**

**Application must be RECEIVED no later than  
Friday, January 31, 2015**

<b>Attach Picture Here</b>