

**DELTA SIGMA THETA SORORITY, INC.**  
**HARFORD COUNTY ALUMNAE CHAPTER**  
**SCHOLARSHIP APPLICATION 2020**

THE HARFORD COUNTY ALUMNAE CHAPTER IS OFFERING ITS ANNUAL **SCHOLARSHIP AWARDS** TO 2020 GRADUATING SENIORS FROM HARFORD AND CECIL COUNTIES BECAUSE WE HAVE A SINCERE INTEREST IN THE FUTURE ACADEMIC ENDEAVORS OF OUR YOUTH. THESE SCHOLARSHIP AWARDS ARE \$1,000 NON-RENEWABLE GRANTS.

WE ENCOURAGE QUALIFIED STUDENTS TO APPLY FOR THIS ONE-TIME OPPORTUNITY BY SUBMITTING THE FOLLOWING INFORMATION, AND IF INVITED, PARTICIPATING IN THE INTERVIEW:

- A COMPLETED SCHOLARSHIP APPLICATION
- A COPY OF THE ACCEPTANCE LETTER FROM THE COLLEGE OR UNIVERSITY THE APPLICANT PLANS TO ATTEND
- AN **\*\*OFFICIAL\*\*** TRANSCRIPT
- THE DATA REQUESTED IN PART II
- THE COMPOSITION, 150 – 250 WORDS, AS DESCRIBED IN PART II
- THE ESSAY(S) AND LETTER(S) OF RECOMMENDATION AS DESCRIBED IN PART III
- HIGH SCHOOL COUNSELOR'S REPORT ON PAGE 5
- PHOTO (OPTIONAL); AND
- INTERVIEW FOR FINALISTS WILL BE SCHEDULED FOR **MARCH 15, 2020**

APPLICATIONS MAY BE OBTAINED FROM EACH HIGH SCHOOL COUNSELOR IN HARFORD AND CECIL COUNTIES, ON YOUR SCHOOL'S SCHOLARSHIP PORTAL, AND/OR DOWNLOADED FROM THE HCAC WEBSITE: [WWW.DSTHCACMD.ORG](http://WWW.DSTHCACMD.ORG)

EACH APPLICANT MUST SUBMIT ALL INFORMATION TO BE **POSTMARKED** BY **SATURDAY, FEBRUARY 22, 2020**, MAILED TO THE FOLLOWING ADDRESS:

**DELTA SIGMA THETA SORORITY, INC.,**  
**HARFORD COUNTY ALUMNAE CHAPTER**  
**C/O SCHOLARSHIPS COMMITTEE**  
**P.O. BOX 315**  
**ABERDEEN, MD 21001**

ALL QUESTIONS SHOULD BE DIRECTED TO:  
[SCHOLARSHIP@DSTHCACMD.ORG](mailto:SCHOLARSHIP@DSTHCACMD.ORG)

SINCERELY,

**Kira Sconion**  
CHAPTER PRESIDENT

**Lora Williams**  
FIRST VICE PRESIDENT  
CHAIR, SCHOLARSHIPS COMMITTEE

**DELTA SIGMA THETA SORORITY, INC.**  
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**SCHOLARSHIP APPLICATION 2020**

PLEASE TYPE OR PRINT (USE BLUE OR BLACK INK ONLY)

**PART I – ALL INFORMATION IN THIS SECTION RELATES TO THE STUDENT APPLICANT**

NAME: \_\_\_\_\_ GENDER: F  M   
(LAST) (FIRST) (MIDDLE)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

HOME PHONE: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ BEST PHONE: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ GPA: \_\_\_\_\_

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

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

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**PART II – PROVIDE THE FOLLOWING DATA ON A SEPARATE SHEET AND SPECIFY EACH YEAR OF PARTICIPATION AND POSITIONS OR OFFICES HELD:**

1. LIST ALL SCHOOL RELATED EXTRACURRICULAR ACTIVITIES THAT YOU HAVE PARTICIPATED IN DURING THE PAST FOUR (4) YEARS. INDICATE LEADERSHIP POSITIONS, IF APPLICABLE.
2. LIST ANY ACADEMIC AWARDS/HONORS YOU HAVE RECEIVED DURING THE PAST FOUR (4) YEARS.
3. LIST ALL COMMUNITY RELATED ACTIVITIES FOR WHICH YOU HAVE BEEN AN ACTIVE PARTICIPANT. INDICATE LEADERSHIP POSITIONS, IF APPLICABLE.
4. IN A WELL WRITTEN COMPOSITION OF 150-250 WORDS, EXPLAIN YOUR CAREER GOAL(S) AND EDUCATIONAL PLAN TO PURSUE YOUR GOAL(S).

**PART III – SCHOLARSHIP DESCRIPTIONS AND ELIGIBILITY CRITERIA**

WE WILL AWARD FIVE TYPES OF SCHOLARSHIPS, AND IT IS POSSIBLE FOR MORE THAN ONE STUDENT TO RECEIVE THE SAME TYPE. A STUDENT MAY APPLY FOR ONE OR MORE AS APPROPRIATE, BY SUBMITTING THE REQUIRED DOCUMENTATION. HOWEVER, ONLY ONE SCHOLARSHIP WILL BE AWARDED TO EACH STUDENT. PLEASE SEE PAGES 3 AND 4 FOR THE LIST OF SCHOLARSHIPS.

**I HEREBY CERTIFY** THAT ALL STATEMENTS MADE HEREIN AND ON ANY ATTACHMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. SUBMISSION OF FALSE INFORMATION WILL RESULT IN DISQUALIFICATION. **INCOMPLETE APPLICATION PACKETS WILL NOT BE CONSIDERED.**

PRINT YOUR NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

YOUR PEN AND INK SIGNATURE (NO DIGITAL SIGNATURES)

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**LIST OF SCHOLARSHIPS**

PLEASE CHECK THE BOX OF THE SCHOLARSHIP(S) FOR WHICH YOU ARE APPLYING

**PUBLIC SERVICE SCHOLARSHIP**

- AWARDED TO A STUDENT WHO HAS A PASSION FOR COMMUNITY SERVICE
- PUBLIC SERVICE IS A VOLUNTEER EFFORT THAT PROVIDES A SERVICE TO THOSE IN NEED AND HAS LASTING POSITIVE IMPACT ON THE COMMUNITY AT LARGE
- ONE YEAR OF CONSISTENT COMMUNITY SERVICE IN THE LAST 18 MONTHS (IF AN APPLICANT HAS WORKED WITH AN ORGANIZATION FOR LESS THAN A YEAR, MULTIPLE LETTERS FROM OTHER ORGANIZATIONS CAN BE PROVIDED TO PROVE CONSISTENT SERVICE FOR AT LEAST ONE YEAR). EX: VOLUNTEER AT A SOUP KITCHEN, ORGANIZED A BLOOD DRIVE, ETC.
- LETTER OF RECOMMENDATION FROM ONE OR MORE OF THE SERVICE ORGANIZATIONS WITH WHICH THEY HAVE WORKED, WHICH INCLUDES THE AMOUNT OF TIME THE STUDENT HAS SERVED. LETTER MUST BE ON ORGANIZATION'S LETTERHEAD, AND SIGNED WITH PEN/INK
- PROVIDE AN ESSAY SUMMARIZING THE IMPACT OF YOUR COMMUNITY SERVICE EFFORTS, IN NO MORE THAN 250 WORDS
- NO GPA THRESHOLD

**ACADEMIC SCHOLARSHIP**

- AWARDED TO A STUDENT WITH HIGH ACADEMIC ACHIEVEMENT
- MINIMUM 3.8 GPA ON A NON-WEIGHTED SCALE OR 4.3 GPA ON A WEIGHTED SCALE
- LETTER OF RECOMMENDATION THAT SPEAKS TO THE STUDENT'S ACADEMIC SUCCESS FROM THE SCHOOL COUNSELOR OR A TEACHER, AND SIGNED WITH PEN/INK
- PROVIDE AN ESSAY SUMMARIZING HOW YOU ACHIEVED ACADEMIC SUCCESS AND YOUR THOUGHTS ON HOW TO MOTIVATE OTHERS TO DO THE SAME, IN NO MORE THAN 250 WORDS

**HBCU SCHOLARSHIP**

- AWARDED TO A STUDENT WHO WILL ATTEND AND CONTINUE TO PURSUE AND EXEMPLIFY THE MISSION OF AN HBCU
- LETTER OF ACCEPTANCE FROM AN HBCU
- MINIMUM 3.0 GPA ON A NON-WEIGHTED SCALE OR 3.5 GPA ON A WEIGHTED SCALE
- LETTER OF RECOMMENDATION FROM A SCHOOL COUNSELOR OR TEACHER, AND SIGNED WITH PEN/INK
- PROVIDE AN ESSAY DESCRIBING A MINORITY FIGURE WHO HAS INSPIRED YOU TO ACHIEVE EXCELLENCE AND HOW THAT HAS IMPACTED YOUR LIFE, IN NO MORE THAN 250 WORDS

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**STEM SCHOLARSHIP**

- AWARDED TO FEMALE APPLICANTS ONLY, WHO WILL PURSUE A STEM PATH OF STUDY
- TRANSCRIPT SHOULD SHOW A HIGHER NUMBER OF STEM-RELATED COURSES
- MINIMUM 3.0 GPA ON A NON-WEIGHTED SCALE OR 3.5 GPA ON A WEIGHTED SCALE
- LETTER OF RECOMMENDATION FROM A STEM TEACHER, AND SIGNED WITH PEN/INK
- PROVIDE AN ESSAY EXPLAINING WHAT HAS INSPIRED YOU TO PURSUE A STEM-RELATED AREA OF STUDY AND WHAT WOULD ENCOURAGE OTHER FEMALES TO TAKE THE SAME PATH, IN NO MORE THAN 250 WORDS

**CASSANDRA DENISE WALDON MEMORIAL SCHOLARSHIP**

CASSANDRA, A NATIVE OF HARFORD COUNTY AND MEMBER OF DELTA SIGMA THETA SORORITY INC., LIVED AND WORKED IN ITALY AS THE COMMUNICATIONS DIRECTOR FOR THE INTERNATIONAL FUND FOR AGRICULTURAL DEVELOPMENT, A UNITED NATIONS AGENCY. IN AN INTERVIEW WITH A YOUTH OBSERVER TO THE UN, SHE ONCE SAID: "WHEN THERE ARE MANY DIFFERENT OPPORTUNITIES AND YOU HAVE TO DECIDE WHICH PATH TO GO DOWN ON, IT'S IMPORTANT TO GO WHERE YOUR PASSIONS LIE AND BE OKAY WHEN DOWN THE COURSE OF YOUR CAREER THOSE PASSIONS CHANGE AND STRAY FROM WHAT YOU ORIGINALLY PLANNED."

- AWARDED TO FEMALE APPLICANTS ONLY, WHO WILL PURSUE A JOURNALISM, ENGLISH, OR INTERNATIONAL STUDIES DEGREE
- PREFERENCE WILL BE GIVEN TO A STUDENT ATTENDING CLARK ATLANTA UNIVERSITY. IF NO APPLICANT IS ATTENDING CLARK ATLANTA UNIVERSITY, THEN ANY OTHER HBCU WILL BE CONSIDERED
- TRANSCRIPT SHOULD SHOW HIGH ACADEMIC ACHIEVEMENT IN EITHER JOURNALISM, ENGLISH, WRITING, FOREIGN LANGUAGE, OR ANY INTERNATIONAL STUDIES COURSES
- MINIMUM 3.0 GPA ON A NON-WEIGHTED SCALE OR 3.5 GPA ON A WEIGHTED SCALE
- LETTER OF RECOMMENDATION FROM AN ENGLISH TEACHER OR EDITOR OF A PUBLICATION, SUCH AS PROFESSIONAL NEWSPAPER, SCHOOL NEWSPAPER OR MAGAZINE. LETTER MUST BE SIGNED WITH PEN/INK (NO STAMPS OR ELECTRONIC SIGNATURES)
- PROVIDE AN ESSAY THAT DISCUSSES WHO OR WHAT HAS INSPIRED YOU TO PURSUE A CAREER IN EITHER JOURNALISM, ENGLISH OR INTERNATIONAL STUDIES AND HOW DO YOU VISUALIZE YOUR CAREER FIVE YEARS POST-GRADUATION, IN NO MORE THAN 500 WORDS

**DELTA SIGMA THETA SORORITY, INC.**  
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**HIGH SCHOOL COUNSELOR REPORT**  
(PLEASE PRINT USING BLACK OR BLUE INK ONLY OR TYPE)

**TO BE COMPLETED BY THE STUDENT:**

THE APPLICANT SHOULD COMPLETE THE SECTION BELOW AND GIVE TO A SCHOOL COUNSELOR OR TEACHER FOR COMPLETION. OFFICIAL SCHOOL PERSONNEL MUST SIGN THIS FORM. **THIS FORM MUST ACCOMPANY YOUR APPLICATION.**

STUDENT'S NAME: \_\_\_\_\_  
HOME ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
NAME OF HIGH SCHOOL: \_\_\_\_\_  
SCHOOL ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
SIGNATURE OF STUDENT \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_  
**YOUR PEN AND INK SIGNATURE (NO DIGITAL SIGNATURES)**

**TO THE COUNSELOR OR TEACHER:**

PLEASE COMPLETE THE FOLLOWING INFORMATION AND RETURN TO THE STUDENT TO INCLUDE WITH THE SCHOLARSHIP APPLICATION.

**1. EVALUATE THE APPLICANT'S PERSONAL QUALIFICATIONS USING THE FOLLOWING KEY:**

**1 - OUTSTANDING    2 - AVERAGE    3 - BELOW    4 - NO BASIS FOR JUDGMENT**

\_\_\_\_\_ **DEPENDABILITY:** RELIABILITY, PROMPTNESS, ATTENDANCE  
\_\_\_\_\_ **MATURITY:** POISE, HANDLES VARIOUS SITUATIONS APPROPRIATELY  
\_\_\_\_\_ **BEHAVIOR:** WELL MANNERED, RESPECTFUL, COOPERATIVE  
\_\_\_\_\_ **WORK HABITS:** INDUSTRIOUS, TAKES INITIATIVE, SELF-RELIANT  
\_\_\_\_\_ **LEADERSHIP:** POSITIVE INFLUENCE, MOTIVATES OTHERS  
\_\_\_\_\_ **CONFLICT RESOLUTION:** SETTLES CONFLICT/DISPUTES USING APPROPRIATE METHODS IN LIEU OF PHYSICAL OR VERBAL AGGRESSION

**Please place official school seal in this box.**

**2. COMMENTS:**

IN YOUR OPINION, IF THE APPLICANT IS OUTSTANDING OR BELOW AVERAGE IN ANY FACTOR, PLEASE GIVE REASON FOR YOUR EVALUATION:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OFFICIAL SCHOOL PERSONNEL'S SIGNATURE:** \_\_\_\_\_  
YOUR PEN AND INK SIGNATURE (NO DIGITAL SIGNATURES)

**TITLE:** \_\_\_\_\_

**OFFICE TELEPHONE #:** (\_\_\_\_) \_\_\_\_ - \_\_\_\_                      **DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_