Mid Hudson Valley Alumnae Chapter

Delta Sigma Theta Sorority, Incorporated

P.O. Box 989, Poughkeepsie, New York 12602
Website: www.mhvadst.org Email: info@mhvadst.org

January 6, 2020

Dear Applicant:

The Mid-Hudson Valley Alumnae Chapter of Delta Sigma Theta Sorority, Inc. is pleased to announce the availability of scholarships for graduating seniors for the academic year 2019-2020. Delta Sigma Theta Sorority, Inc. is a nonprofit organization of college-educated women committed to the constructive development of its members and to public service with primary service in the black community. Delta Sigma Theta Sorority, Inc. has more than 1000 chapters in the United States and several foreign countries. Delta Signa Theta Sorority, Inc. was founded on January 13, 1913 by 22 collegiate women of Howard University. These students wanted to use their collective strength to promote excellence and to provide assistance to those in need. The focus of the sorority's activities is in the following areas: *Educational Development, Economic Development, Physical and Mental Health, Political Awareness and Involvement, and International Awareness and Involvement.*

The Mid-Hudson Valley Alumnae Chapter was chartered on June 27, 1970. Since that time, it has supported many community agencies and a wide range of community action projects in the Mid-Hudson Valley area. These projects focus on such target groups such as senior citizens, youth, and families.

Scholarships are awarded annually to female graduating seniors that are college-bound who reside in the Mid-Hudson Valley area, specifically Ulster, Orange, Dutchess or Putnam counties. The scholarships are awarded on the basis of academic achievement, community service and school involvement. The minimum requirement to apply for scholarship, the student must have an overall grade point average of 85%. The submissions will also be judged on the basis of responsive to the essay topic, overall literacy and grammatical accuracy and in person interview. Essays should not exceed 500 words in length and printed or typed.

Completed application packets should be postmarked and received **no later than April 6, 2020.**

Thank you in advance for your interest in our scholarship program. If you have any questions, please contact us at smcintyredst@aol.com.

Best wishes in your future educational endeavors.

Sincerely,

Sophia McIntyre-Daniel and Shawna Newkirk- Reynolds
Scholarship Committee Chairpersons

Annette Brooks
Chapter President

Enclosure

DELTA SIGMA THETA SORORITY, INC.
Mid Hudson Valley Alumnae Chapter
P.O. Box 989
Poughkeepsie, NY 12602

SCHOLARSHIP APPLICATION

(Please type or print with ball point pen)

PART I: APPLICANT INFORMATION

First Name	Middle Name	Last Name

Street Address:		
City	State	Zip Code
Date of Birth: (Month/Day/Year	Home Phone:	
Email:	Mobile Phone:	
Name of High School:		
Grade:	Overall GPA:	

PART II: HONORS AND AWARDS (Academic/ Athletic/Community/ School Awards)

Name of Award	Organization/Source of Award	Reason(s) for Award

PART III: EXTRACURRICULAR/SCHOOL ACTIVITIES

Name of Group/Activity	Grade (Check all boxes that apply)				Leadership Positions Held
	9	10	11	12	
	❒	❒	❒	❒	
	❒	❒	❒	❒	
	❒	❒	❒	❒	
	❒	❒	❒	❒	

PART IV: EXTRACURRICULA COMMUNITY ACTIVITIES		
Name of Activity	**Duration of Activity (MONTH/YEAR)**	**LEADERSHIP POSITION HELD/**

PART V: SPECIAL TALENTS

PART VI: PARENTAL/GUARDIAN INFORMATION	
Mother's/Guardian's Name:	
Place of Employment:	Occupation:
Home Address:	
Phone Number:	Email:
Father's/Guardian's Name:	
Place of Employment	Occupation:
Home Address:	
Phone Number:	Email

Delta Sigma Theta Sorority, Inc.
SCHOLARSHIP APPLICATION (continued)

PART VII : FINANCIAL NEED

Did you complete the Free Application for Federal Student Aid (FAFSA) form yet?
Yes / No / Will not be applying (circle one).

If yes, what is your Expected Family Contribution (EFC) stated on your FAFSA or Student Aid Report (SAR)? _____

Number of Dependent Children in Family	**Number of Dependent Children Currently Attending College/University**
Signature Parent/Guardian	**Date**

PART VIII: SCHOLARSHIP/AWARDS

Name of Scholarship, Loan, Grant or Award Applied	Awarding Organization	Amount Expected (AE)/Amount Awarded(AA)

PART IX: SIGNATURES

My signature confirms that all above information given is true and correct:

Signature of Applicant:	Date:
Signature of Parent/Guardian:	Date:

Completed application should include:

- ❒ Scholarship Application
- ❒ Essay
- ❒ An Official Transcript in sealed envelope
- ❒ One Letter of Recommendation (in sealed envelope from teacher, religious leader OR community representative)

Application Deadline: Must be received by April 6, 2020. (Must be postmarked and received by this date). Mail to:

Scholarship Committee Chairperson
Mid Hudson Valley Alumnae Chapter
Delta Sigma Theta Sorority, Inc.
P.O. Box 989
Poughkeepsie, NY 12602

PART X: ESSAY

Please choose one of the three essay topics. **(*Word Limit 500 words*)**

(1) Describe where you will see yourself in 10 years from now? What will you have accomplished?

(2) What do you consider to be the single most important societal problem? Why?

(3) Describe an experience or a set of circumstances that has a significant impact on your life. The experience may be one in which you were challenged and overcame an obstacle or one in which you learned the most.

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RECOMMENDATION FORM

Please have a teacher, religious leader, civic leader or other non-related person complete and sign this recommendation form and return it to you in a sealed envelope. A separate sheet may be used if additional space is needed.

APPLICANT'S NAME: _____

1. How long have you known the applicant and in what capacity?

2. In what ways has the applicant demonstrated the ability to lead?

3. Would you describe this applicant as a role-model and if so why?

4. If you had to describe this applicant in 3 words, what would they be and why?

5. Why are you recommending this applicant for a Delta Sigma Theta Sorority, Inc. Scholarship?

Name: _____ Title: _____
(Please Type/Print

Signature:_____ Date:_____