

**Delta Sigma Theta Sorority Inc.
Buffalo Alumnae Chapter
SCHOLARSHIP APPLICATION***

This Scholarship is for African-American students of the Buffalo/Niagara Region.

Name _____ Telephone Number _____

Address _____ City _____

Zip Code _____ Birth Date _____

Email Address _____

School _____ Graduation Date _____

Major _____ Grade Point Average _____
(January 2020)

Father's Name _____

Address _____

Occupation _____

Mother's Name _____

Address _____

Occupation _____

Brothers and Sisters

Age

School or Occupation

1. _____
2. _____
3. _____
4. _____
5. _____

List Special Honors & Awards (Include membership in Honor Societies):

List All Extra Curricular School and Community Activities:

Hobbies and Special Skills:

Church Affiliation and Church Activities:

What College or University do you plan to attend?

Have you been accepted? _____ YES _____ NO

Annual College Expenditures:

Travel	_____
Tuition/Fees	_____
Clothing	_____
Room/Board	_____
Books/Supplies	_____
Other	_____

List all other scholarships for which you have applied:

1. _____

2. _____

3. _____

References: Two letters of reference from individuals who have knowledge of your academic, extra-curricular activities, and community service **must accompany this application.** Relatives and friends are not acceptable. List names of references below.

Name _____ Telephone Number _____

Address _____

Name _____ Telephone Number _____

Address _____

How did you find out about the Delta Sigma Theta Scholarship?

Please write an essay about yourself and what has influenced your desire to seek higher education. The essay must be between 250 and 350 words. Attach the essay to your application. It must be typed and double spaced. The essay will be rated as a part of the application process.

Please type your information into the form before downloading. Applications along with supporting documentations should be emailed as one attachment to scholarshipdst@gmail.com. Please do not take photos with your phone of required documents as they will not be accepted

Applications that are being mailed via U.S. postal mail **MUST also be typed**, include all supporting documentation and sent to the Attention of Dr. Ramelli Choates

**Delta Sigma Theta Sorority, Inc.
Buffalo Alumnae Chapter
P.O. Box 625
Buffalo, New York 14215
Phone (716) 241-1812 - Email – scholarshipdst@gmail.com**

An **official transcript and two letters of recommendation** must also be submitted in order for the application to be considered. Please contact your high school Guidance Counselor in order to complete this process.

All documents **must be postmarked by Wednesday, April 1, 2020.** Applications received after this date will not be eligible for consideration. A personal interview is a part of the application process and applicants will be contacted by mail with a specific appointment date and time.

Please note: Applications lacking any of the required documentation (completed application, two reference letters, essay, and official school transcript) will not be considered.

***Children, grandchildren and siblings of members of Buffalo Alumnae Chapter, Delta Sigma Theta Sorority, Inc. are ineligible for this scholarship.**