Hinesville Alumnae Chapter Delta Sigma Theta Sorority, Inc. A Service Sorority



2016 - 2017

The Annie B. Givens College Scholarship Application

Applications must be postmarked <u>and</u> returned via mail to:

Sarah C. Stevens Delta Sigma Theta Scholarship Awards Committee P.O. Box 1981 Hinesville, GA 31310

> by April 10, 2017

(Applications received after this date will not be considered)

For additional information, contact: Sarah C. Stevens Scholarship Committee HAC_scholarship@yahoo.com



Application Checklist*

Before sealing your package, please make sure all items listed below are included:

- Completed and signed scholarship application
 (Signed by Applicant and Parent/Guardian)
- □ Essay (typed)

□ Two letters of recommendation on official letterhead (one letter must be from one of your current teachers) Letters must not be from family members. (NOTE: Letters must be signed, typed on letterhead and enclosed in a sealed envelope.)

- Official High School Transcript (sealed)
- □ Proof of College Acceptance
- Disclaimer for Scholarship Funds Disbursement (Signed by Parent/Guardian)

*Missing any of the above items will result in an incomplete package and will not be considered for an award.

Confidentiality Notice: <u>All information and responses submitted in this application packet is strictly</u> <u>confidential and is intended solely for the use by the members of</u> <u>Hinesville Alumnae Chapter – Delta Sigma Theta Sorority, Inc.</u>



Delta Sigma Theta Sorority, Inc. is an international public service sorority that is comprised of more than 200,000 predominately African-American women. Encouraging young people to excellence through higher education is a primary focus of our organization. We support this focus by awarding scholarships to young people who exemplify academic excellence, strong leadership, and community involvement.

Applications for scholarships must be postmarked by Monday, April 10, 2017 <u>and</u> returned via mail. Notification of awards will be made in May 2017.

SCHOLARSHIP GUIDELINES

Incomplete or late applications will not be considered.

- Applicants must be graduating high school seniors who live or attend school in Liberty, Bryan, Long or Wayne County. Applicants must attend an accredited college, university, or technical school in pursuit of a degree.
- Applicants must have at least a 3.0 cumulative Grade Point Average on a 4.0 scale in order to qualify for a scholarship award. For schools not operating on a 4.0 scale, we will accept the equivalent. Applicants are **required to submit an official high school transcript in a sealed envelope and proof of college acceptance.**
- All **official communication** regarding the application process will transpire via e-mail. Please ensure that email address is legible and accurate on the application. Failure to receive email communication rests solely with the applicant.
- Applicants are required to submit two typed letters of recommendation. Letters must be signed, typed on official letterhead and enclosed in a sealed envelope.
- Parent/Guardian is required to sign a Scholarship Funds Disbursement Disclaimer.
- **One** of the **five** scholarships will be awarded to a student attending a Historically Black College/University (HBCU).

Applicants are required to submit a typed essay that answers the following statement: Share your personal point of view on the most recent presidential election and its effects on your life.

The essay is an important part of the selection process. Essay must be double-spaced, 12 point Times New Roman font, 2 page maximum, one inch margin on all sides, name typed in the upper right-hand corner of each page. In reviewing the essays, the judges will consider the following criteria in selecting winners:

- Creativity
- Correct use of grammar and punctuation
- Originality and quality of ideas presented
- Organization of essay



Student Profile:

Name		
Address		
City/State/Zip		
Home Phone	Ce	ell Phone
Email Address		
Parent/Guardian		
Parent/Guardian Address (if differ	ent from above)	
Parent/Guardian Phone (if differer	nt from above)	
Annual Family Income: Select the a \$75,001 and above; \$40,001 - \$50,000;	\$60,001 - \$75,000;	-
Academic Profile: High School Name		
High School Address		
City/State/Zip		Phone
Cumulative Grade Point Average (on a 4.0 scale)	
 → Please include your official hig → Please include proof of college <u>Employment</u>: 	-	a sealed envelope with application
Are you currently employed?	□YES □NO	
If yes, Employer Name Position	Date Employed	Average hours worked per wee

Leadership/Community Service Profile:

List any activities (i.e. clubs, church, organizations, sports) in which you have been involved and any leadership roles held. **You may attach a separate sheet if more space is needed.**

ORGANIZATION/ACTIVITY	LEADERSHIP ROLE/OFFICE HELD	DATES INVOLVED		
	academic, church, community, sports)			
Collegiate Goals				
Please list the colleges to which you				
1 2				
What course of study do you plan to pursue? Please list any other scholarships for which you have applied.				
References - List two below				
	Phone Number			
Address				
B. Name	Phone Number			

Please have your references submit a typed letter of recommendation for you. Each letter of recommendation should be signed, typed on letterhead and placed in a sealed envelope and returned to the applicant to be included in the application package. **A separate sheet with instructions for references is included.** Letters should be addressed to Delta Sigma Theta Sorority, Inc., Hinesville Alumnae Chapter and include:

- Name and address of reference
- Relationship to applicant
- How long reference has known applicant
- Information regarding why applicant should receive the scholarship award



CERTIFICATIONS

Please indicate by your signatures (original signatures only) below that you certify that the statements below are correct.

1. I certify that all information provided is correct and complete to the best of my knowledge. I give the Hinesville Alumnae Chapter of Delta Sigma Theta Sorority, Inc. permission to verify any information contained in my information package, as necessary. I understand that misrepresentation of any information or the submission of inaccurate or incomplete information will result in disqualification to be considered for a scholarship or forfeiture of any award that I may receive and there is no appeal process.

2. I certify that the applicant is: (please check all that apply)

- □ a resident or attends high school in Liberty, Bryan, Long or Wayne counties
- $\hfill\square$ a high school senior graduating in 2017

3. I understand that if the applicant is awarded a scholarship the funds will be sent directly to the college/university once the proper verification forms have been completed and returned to the Hinesville Alumnae Chapter of Delta Sigma Theta Sorority, Inc.

4. I hereby grant the Hinesville Alumnae Chapter of Delta Sigma Theta Sorority, Inc. the unrestricted right and permission to use and re-use my likeness in any and all publications, including photograph, television broadcast, video recording, internet sites, audio-recording or any other form of electronic or print communication (the Promotional Materials), for its own purposes without payment or any other consideration to me, in perpetuity.

Applicant Signature

Date

Parent/Guardian Signature

Date



SCHOLARSHIP APPLICATION DISCLAIMER

AGREEMENT FOR DISBURSEMENT OF SCHOLARSHIP FUNDS

I, ______ (Parent/Guardian) acknowledge and understand that the scholarship awards received by the winners will only be disbursed directly to the university/college or technical school identified by the scholarship recipient.

______(Student's Name).

Scholarship Awards must be claimed within the upcoming academic school year from date of award, or the award will be forfeited. No exceptions.

The Hinesville Alumnae Chapter of Delta Sigma Theta Sorority, Inc. reserves the right to determine increments of scholarship disbursements based on award amount and student maintaining a good academic standing in accordance with their university, college or technical school.

The Hinesville Alumnae Chapter of Delta Sigma Theta Sorority, Inc. will forward these funds to the institution upon receipt of the enrollment Verification Form or the Official Registration Schedule.

Funds will be placed in student's account with the Financial Aid Office and/or Student Affairs Office.

I recognize and accept these conditions for the disbursement of any scholarship award that my child may receive.

Parent/Guardian Signature

Date



INSTRUCTIONS TO BE GIVEN TO REFERENCES

Please have your references submit a typed letter of recommendation for you. These letters should be on official letterhead, addressed to Delta Sigma Theta Sorority, Inc., Hinesville Alumnae Chapter and include:

- Name and address of reference
- Relationship to applicant
- How long reference has known applicant
- Information regarding why applicant should receive the scholarship award

The letter should be placed in a **sealed envelope** before returning to the applicant. Failure to supply all information listed will result in applicant receiving a **lower score**.



HINESVILLE ALUMNAE CHAPTER DELTA SIGMA THETA SORORITY, INC. 2016-2017 Scholarship Application Form

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