



**Delta Sigma Theta Sorority, Inc.
Solano Valley Alumnae Chapter
A Public Service Sorority**



XANTHIA WARREN SCHOLARSHIP APPLICATION

Please complete and return to:

Delta Sigma Theta Sorority, Inc.
Solano Valley Alumnae Chapter
Attention: Scholarship Committee
P.O. Box 3475
Fairfield, CA 94533

GENERAL INFORMATION AND INSTRUCTION FOR APPLICATION

Delta Sigma Theta Sorority, Inc., Solano Valley Alumnae Chapter recognizes and honors students who are committed to academic excellence, positive leadership, and community service. We are offering scholarships up to \$2000.

- Eligibility for this scholarship is limited to graduating female African-American high school seniors who are residents of Solano County and attend a high school in Fairfield, Travis AFB, Cordelia, Vacaville, Suisun, Dixon, and Rio Vista communities. The applicant must demonstrate the following:
 - Academic achievement (minimum overall grade point average of 2.75 G.P.A. on a 4.0 scale).
 - Leadership ability as demonstrated and verified by participation in extracurricular activities, community service, and/or holding positions in organizations.
 - Will attend a two-year accredited Community College or four-year accredited University/College in Fall 2020.
- To be considered, this application packet **MUST BE POSTMARKED** no later than **APRIL 1, 2020**. A completed application packet will include all of the following:
 - A sealed and unopened official High School transcript. Transcript must include a cumulative grade point average (GPA).
 - Two (2) typed letters of recommendation: One letter from (a) counselor, principal or teacher and one letter from (b) community representative (i.e. church leader, volunteer organization, City Council Member)/employer on school/organization letterhead.
 - One (1) typed essay adhering to the scholarship application guidelines outlined on Page 3 of the scholarship application.
 - Typed or legible handwritten completion of all sections of this application (please place "N/A" for items that are not applicable).
 - 5X7 or wallet-size color photo of the student; preferably a head shot (Note: Photos will not be returned).

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- Completed application materials received by the deadline will be screened and evaluated by the committee. Incomplete applications (i.e. unofficial transcripts provided, missing student photo or applications, essays, letters of recommendations) **will not be considered nor returned** for completion. Those candidates deemed as winners will be notified via US Postal Mail.
- Scholarship Awards will be paid directly to the student upon confirmation of current enrollment from the Office of Register. The Scholarship Award must be used for academic purposes only. If award is used for other purposes, recipient no longer plans to attend college, and/or cannot provide confirmation of current enrollment by December 31, 2020; the award will be forfeited and cannot be recuperated at a later date.
- If there are questions regarding the application or application process, please contact Denise Johnson, Scholarship Chair at (707) 322-4968.

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SCHOLARSHIP APPLICATION

Applicant Information	
Name:	
Address:	
Phone (Home):	Phone (Cell):
Email:	
Age:	Birth Date:
School Information	
High School:	
Address:	
Principal or Counselor Name:	Principal or Counselor Phone:
Overall GPA:	SAT/ACT Score:
Father/Parent/Guardian	
Name:	
Address:	
Phone (Day):	Phone (Evening):
Email:	Income:
Employer:	Occupation:
Mother/Parent /Guardian	
Name:	
Address:	
Phone (Day):	Phone (Evening):
Email:	Income:
Employer:	Occupation:
Total Household Income:	
How many reside in your household (including minors)?	

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Activities

List your extracurricular school & community activities (including community service, church leadership etc.)
If additional space is required, attach one (1) typed 8 ½ x 11 sheet.

Community Service Activities

Organization	Dates	Level of Participation (i.e. office held, honors, volunteer)

Extracurricular Activities

Organization	Dates	Level of Participation (i.e. office held, honors, volunteer)

Awards/Recognitions

Award	Organization	Dates

Work Experience

Employer:
Job Title:
Duties:
Dates:
Employer:
Job Title:

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Duties:
Dates:
References
Principal/Counselor/Teacher:
Community Representative/Employer:
Education Plan
Name of College/University you applied to for Fall 2020
Name of College/University:
Location:
Name of College/University:
Location:
Name of College/University:
Location:
Desired Major(s):
Essay
<p>Please attach a typewritten essay, twelve (12) point font, double-spaced, consisting of a minimum of 500 words and not exceeding 1000 words discussing the following essay topic:</p> <p>Upon receiving my college degree(s), I plan to make a difference in my chosen profession, within my community, or within my family...</p>
Application Declaration
<p>I hereby declare that all of the statements in this application are true. Any false information may disqualify the applicant. I am willing to forward any additional information, if deemed necessary. If selected as a scholarship recipient, I grant permission for my name, information, image, photo, or likeness to be used in press releases, websites, publications or other media outlets identifying me as a scholarship recipient of the Solano Valley Alumnae Chapter. I also understand, if awarded, the scholarship award will be paid directly to the student upon confirmation of current enrollment from the Office of Registrar. The Scholarship Award must be used for academic purposes only. If award is used for other purposes, if I no longer plan to attend college, and/or cannot provide confirmation of current enrollment by December 31, 2020, the award will be forfeited and cannot be recuperated at a later date. I agree to accept the decision of the Scholarship Committee of Delta Sigma Theta Sorority, Inc., Solano Valley Alumnae Chapter.</p> <p>Student Signature: _____ Date: _____</p> <p>Print Name: _____</p>

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Parent/Guardian Signature: _____ Date: _____

Print Name: _____

APPLICATION CHECKLIST

Please note this application is not complete without the following:

- A sealed and unopened official High School transcript postmarked by April 1, 2020
- Transcript must include a cumulative grade point average (GPA).
- Two (2) typed letters of recommendation: One letter from (a) counselor, principal or teacher and one letter from (b) community representative (i.e. church leader, volunteer organization, City Council Member)/employer on school/organization letterhead.
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