



Valley Forge Alumnae Chapter
Serving Chester and Montgomery Counties

Valley Forge, PA
Chartered 1991

Tracey Howard, President

2018 SCHOLARSHIP APPLICATION

The Valley Forge Alumnae Chapter of Delta Sigma Theta Sorority, Inc. provides funds for student scholarships through donations and fundraising events. It is the intent that the scholarship be made available to minority students residing in the Chester and Montgomery Counties of Pennsylvania, who exemplify good citizenship and demonstrate community service.

ALL COMPLETED APPLICATIONS MUST BE RECEIVED BY MAIL AT THE BELOW ADDRESS ON OR BEFORE February 28, 2018.

Delta Sigma Theta Sorority, Inc.
Valley Forge Alumnae Chapter
P. O. Box 80091
Valley Forge, PA 19484

ELIGIBILITY REQUIREMENTS FOR HIGH SCHOOL APPLICANTS

1. Minority Student;
2. Resident of Chester County or Montgomery County of Pennsylvania;
3. A student graduating from high school prior to September 2018, who will matriculate to a college, university or pursue a non-traditional degree granting program in the fall;
4. 3.0 cumulative grade point average or better on a 4.0 scale (or the equivalent); and
5. Demonstrate public service and good citizenship throughout the application process.

ELIGIBILITY REQUIREMENTS FOR VALLEY FORGE ALUMNAE PREVIOUS SCHOLARSHIP RECIPIENT APPLICANTS:

1. A student and resident (permanent address, not school address) of Chester or Montgomery County of Pennsylvania;
2. A student pursuing a degree from a college, university or a non-traditional degree granting program;
3. Have at least a cumulative 3.0 GPA on a 4.0 scale (or equivalent); and
4. Demonstrate public service and good citizenship throughout the application process.

ALL APPLICANTS SUBMITTING A COMPLETED APPLICATION WILL BE GRANTED A PANEL INTERVIEW UNLESS THEY DO NOT MEET THE ELEGIBILITY REQUIREMENTS.

A COMPLETED APPLICATION FOR HIGH SCHOOL STUDENTS CONTAINS:

- Δ The 3 page application completed in its entirety and signed by the student and a parent/guardian, if the student is under the age of 18.
- Δ A recent photograph.
- Δ An official transcript on letterhead from the high school which includes grades 9 – 11 and the first quarter or semester of the 12th grade.
- Δ List of public service/community service activities (see Section C).
- Δ Essay (See Section D).
- Δ Letter of Recommendation from a school administrator, teacher or professor in a sealed envelope (See Section E).
- Δ Letter of Recommendation from an adult verifying public or community service in a sealed envelope (See Section F).

A COMPLETED APPLICATION FOR PREVIOUS SCHOLARSHIP RECIPIENTS CONTAINS:

- Δ The 3 page application completed in its entirety and signed by the student and a parent/guardian, if the student is under the age of 18.
- Δ A recent photograph.
- Δ An official transcript from the registrar's office; **PACKETS THAT DO NOT INCLUDE THE APPLICANTS' FIRST QUARTER OR SEMESTER GRADES WILL BE DEEMED INCOMPLETE AND WILL NOT BE CONSIDERED.**
- Δ List of current public service/community service activities (see Section C).
- Δ Essay (See Section D).
- Δ Letter of Recommendation from an Administrator or Professor in a sealed envelope (See Section E).
- Δ Letter of Recommendation verifying public service in a sealed envelope (See Section F).

RECIPIENT(S) OF THE 2018 VALLEY FORGE ALUMNAE CHAPTER SCHOLARSHIP WILL BE NOTIFIED OF THE AWARD PRIOR TO MAY 6, 2018.

2018 SCHOLARSHIP APPLICATION

PRINT OR TYPE IN BLACK INK

SECTION A: Personal Information	
Name:	_____
Home Address:	_____
Address while away at school	_____

Home Phone Number:	_____ Cell _____
Email address:	_____
(This e-mail will be used for award notifications & questions)	
Date of Birth	____/____/____ Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
With which racial minority do you identify?	
<input type="checkbox"/> African - American <input type="checkbox"/> Hispanic (Non-White) <input type="checkbox"/> Other _____	
Parent/Guardian's Name	_____
Parent/Guardian's Home Address & Phone Number	_____

Parent/Guardian's e-mail address:	_____
High School or College Currently Attending	_____
Address and Phone Number of the School	_____

Have you ever participated in VFAC's Delta Gems, Delta Academy or any other chapter sponsored event or program? ____	
If so, when?	_____

Student's Name _____

SECTION B: Goals

Please print or type

In the space provided below, briefly explain why a college or non-traditional degree is important to you, and how you will use your degree to improve your life. Include in your statement your goals and what challenges/obstacles you may have to overcome in order to further your education.

Please state any special personal or family circumstances affecting your need for financial assistance.

Student's Name _____

SECTION C: Community Service/Extra-curricular activities

Use additional paper if needed.

Please list your public service involvement(s), your level of responsibility, your role in the activity, length of involvement in activity, and how this impacted the community or school.

Student's Name _____

SECTION D: Essay

Follow these directions carefully!

On a separate sheet of paper, type a personal essay addressing **one** of the statements/questions below:

Applicants:

- Who in your community has had the biggest influence on your life and why?
- Describe in detail how you demonstrate leadership ability both in and out of school.

Your essay **must** be 500 words or less and typed on 8½ x 11 white paper.

Student's Name _____

SECTION E: Authorization and Certification

Please read and sign below.

I certify that all of the information submitted with my application is true and complete to the best of my knowledge. If asked by the Valley Forge Alumnae Chapter President or Scholarship Chairperson, I agree to provide proof of the information presented. I understand that the inclusion of any false or misleading information, or the exclusion of requested information, will result in the removal of my application from consideration for any award and will necessitate the repayment of any award I receive. Moreover, I pledge to use the proceeds from any award for tuition, room and board, books or other expenses directly related to my college education or pursuit of a non-traditional degree.

Permission is hereby given to high school, college/university, or institution of higher learning to release to Valley Forge Alumnae Chapter of Delta Sigma Theta Sorority, Inc. any information concerning my personal circumstances related to my application.

Permission is hereby given to the Valley Forge Alumnae Chapter of Delta Sigma Theta Sorority, Inc. to use the information in my application and or my photograph for publicity and media purposes, with the understanding that my privacy and privacy of my family will be respected.

I understand I must supply all follow-up information by the date requested. I have read the application instructions. I am aware that incomplete or missing information on my application will jeopardize consideration for this award.

Student signature _____

Date _____

Parent/Guardian's signature (if applicant is under the age of 18)

Date _____

Student's Name _____

SECTION F - 2018 LETTER OF RECOMMENDATION – SCHOOL OFFICIAL

Student: Ask a school administrator, teacher or professor who knows you to complete this form. This completed form must be attached to the letter of recommendation accompanying your completed application and be received by mail on or before **February 28, 2018** to:

**Delta Sigma Theta Sorority, Inc.
Valley Forge Alumnae Chapter
P. O. Box 80091
Valley Forge, PA 19484**

Letters of Recommendation submitted separately will not be accepted and your application will be considered incomplete.

Administrator/Teacher/Professor: Thank you for taking the time to recommend this student for the Valley Forge Alumnae Chapter of Delta Sigma Theta Sorority, Inc. scholarship. Please fill out the form below and attach a maximum two-page letter of recommendation, addressing the questions below and providing examples of the student’s behavior supporting your statements. Return your letter and the form to the student in a sealed envelope with your signature across the back seal. Print the student’s name on the front of the envelope. The student must submit your letter of recommendation along with a completed scholarship application by **February 28, 2018, to the post office box above**. Email us at scholarship@dstvalleyforge.org if you have any questions.

Student Name: _____
Your Name _____
Position _____
School/Organization _____
Phone () _____ Email _____
Your Signature: _____ Date: _____

1. How long have you known the student and under what circumstances?
2. Based on your knowledge of the student’s academic ability, how would you rate his/her academic skills and potential to succeed in college or in his/her pursuit of a non-traditional degree?
3. Describe the student’s personality characteristics and motivation level.
4. Explain how the student demonstrates community or public service in your school or community and the impact his/her actions has on your school or the community.

Please include any additional information you feel may assist the Valley Forge Alumnae Chapter of Delta Sigma Theta Sorority, Inc. in evaluating the student for a scholarship.

SECTION G - 2018 LETTER OF RECOMMENDATION – OTHER ADULT

Student: Ask an adult (not a relative) outside of the classroom (for example, coach, club advisor, non-high school counselor, church or community leader, etc.) to complete this form. This completed form must be attached to the letter of recommendation accompanying your completed application and be received by mail on or before **February 28, 2018** to:

**Delta Sigma Theta Sorority, Inc.
Valley Forge Alumnae Chapter
P. O. Box 80091
Valley Forge, PA 19484**

Letters of Recommendation submitted separately will not be accepted and your application will be considered incomplete.

Coach/Advisor/Church and/or Community Leader: Thank you for taking the time to recommend this student for the Valley Forge Alumnae Chapter of Delta Sigma Theta Sorority, Inc. scholarship. Please fill out the form below and attach a maximum two-page letter of recommendation, addressing the questions below and providing examples of the student’s behavior supporting your statements. Return your letter and the form to the student in a sealed envelope with your signature across the back seal. Print the student’s name on the front of the envelope. The student must submit your letter of recommendation along with a completed scholarship application **by February 28, 2018, to the post office box above.** Email us at scholarship@dstvalleyforge.org if you have any questions.

Student Name: _____
Your Name _____
Position _____
School/Organization _____
Phone () _____ Email _____
Your Signature: _____ Date: _____

1. How long have you known the applicant and under what circumstances?
2. How would you describe the applicant’s personality characteristics and motivation level?
3. Describe whether the applicant demonstrates a level of maturity and academic ability that are consistent with the potential to succeed in college or in a non-traditional degree.
4. Explain how the student demonstrates community or public service in his/her school or community and the impact his/her actions have on the school or community.

Please include any additional information you feel may assist the Valley Forge Alumnae Chapter of Delta Sigma Theta Sorority, Inc. in evaluating the student for a scholarship.