



I. PERSONAL DATA

NAME:



HOME ADDRESS:

(CITY)

(STATE)

(ZIP CODE)



BIRTH DATE:



HOME PHONE:



CELL PHONE:



EMAIL ADDRESS:



NAME OF PARENT OR GUARDIAN:



HOME ADDRESS:

(CITY)

(STATE)

(ZIP CODE)



HOME PHONE:



CELL PHONE:



II. EDUCATION INFORMATION

HIGH SCHOOL NAME:



HIGH SCHOOL COUNSELOR:



CUMULATIVE GRADE POINT AVERAGE (Through Fall Semester, ☐):☐



COUNSELOR'S PHONE NUMBER:



PLEASE NOTE THAT YOU MUST SUBMIT THE FOLLOWING:

- OFFICIAL HIGH SCHOOL TRANSCRIPT (SIGNED BY A HIGH SCHOOL OFFICIAL: ADMINISTRATOR, EDUCATOR OR COUNSELOR)
- YOU MUST HAVE AN OFFICIAL SAT SCORE OF 850 AND ABOVE, OR ACT SCORE OF 15 AND ABOVE
- TWO LETTERS OF RECOMMENDATION FROM TWO HIGH SCHOOL OFFICIALS: ADMINISTRATOR, EDUCATOR, OR COUNSELOR (LETTERS MUST BE ON OFFICIAL HIGH SCHOOL LETTERHEAD)
- VERIFICATION OF SERVICE LEARNING ACTIVITIES
- A WALLET-SIZED PHOTO ATTACHED TO THE COMPLETED APPLICATION



III. ACTIVITIES

▶ **HONOR SOCIETY MEMBERSHIPS/EXTRACURRICULAR ACTIVITIES AND OFFICES HELD:**

▶ **COMMUNITY/CHURCH ACTIVITIES AND OFFICES HELD:**



IV. EDUCATIONAL PLAN

COLLEGE APPLICATIONS SUBMITTED:

NAME & LOCATION OF COLLEGE

STATUS OF APPLICATION

ACCEPTED	PENDING
ACCEPTED	PENDING
ACCEPTED	PENDING
ACCEPTED	PENDING
ACCEPTED	PENDING
ACCEPTED	PENDING



I hereby declare that all of the above statements are true. I have also requested that my official transcript be forwarded directly to the Baltimore Metropolitan Alumnae Chapter, Delta Sigma Theta Sorority, Inc., **Attn: Scholarship Committee**, P.O. Box 992, Baltimore, MD 21203 by **FEBRUARY 8, 2021**. I am willing to appear for a personal interview and to forward any additional information necessary to process the application by the due date. I acknowledge that if selected as a scholarship recipient, I must maintain a minimum 2.75 cumulative GPA to remain eligible for the scholarship. I agree to accept the decision of the Baltimore Metropolitan Alumnae Chapter, Delta Sigma Theta Sorority, Incorporated, as given.

PARENT/GUARDIAN SIGNATURE

DATE

APPLICANT SIGNATURE

DATE