

BALTIMORE COUNTY ALUMNAE CHAPTER DELTA SIGMA THETA SORORITY, INCORPORATED

2021 SCHOLARSHIP APPLICATION GUIDELINES

APPLICATION DEADLINE: APRIL 15, 2021

The Baltimore County Alumnae Chapter (BCAC) of Delta Sigma Theta Sorority, Inc. will award a limited number of scholarships to academically meritorious students based upon available public service funds. Scholarship awards may range from Five Hundred Dollars (\$500) to Two Thousand Five Hundred Dollars (\$2,500) per academic year.

This application may be used for either of the following two (2) scholarships.

L.E.A.D. Scholarship

The BCAC **Leadership & Educational Achievement Development (L.E.A.D.) Scholarship** was established to supplement expenses incurred while a student attends a HBCU, and may be awarded to an eligible applicant for up to five (5) consecutive academic years.

Eligibility Requirements:

- A. Complete and submit the BCAC Scholarship Application in its entirety;
- B. Be accepted into a four-year Historically Black College or University (HBCU);
- C. Be a 2021 high school graduate;
- D. Reside or attend a school in Baltimore County, Maryland;
- E. Have and maintain a 2.75/4.0 GPA or its equivalent; and
- F. Enroll and maintain continuous enrollment at an HBCU.
- G. Maintain criteria for scholarship renewal:
 - i. Minimum cumulative 2.75/4.0 GPA or its equivalent;
 - ii. Proof of a full-time course load during each semester; and
 - iii. Proof of registration for the next semester at an HBCU.

Memorial Scholarship

The BCAC **Memorial Scholarship** was established to commemorate the lives of BCAC members who made significant contributions to the community. This scholarship is intended to help supplement 1 (one) year of expenses incurred while a registered student attends a college or university of his/her choice.

Eligibility Requirements:

- A. Complete and submit the BCAC Scholarship Application in its entirety;
- B. Be accepted into an accredited four-year college or university for one academic year;
- C. Be a 2021 high school graduate; and
- D. Reside or attend a school in Baltimore County.

APPLICATION PROCESS

- ❖ Complete and submit a ***signed*** Scholarship Application along with the items listed below.
- ❖ An official copy of the applicant's complete high school transcript in a **separate sealed envelope from the school**.
- ❖ A copy of the applicant's SAT and/or ACT scores.
- ❖ Letter(s) of acceptance from an accredited four-year college or university. (If applying for the L.E.A.D. scholarship, the acceptance letter must be from a HBCU).
- ❖ Three (3) letters of recommendation **on official letterhead** in **separately sealed** envelopes, from the list of persons (identified on the application form/checklist) who have personally interacted with you through supervision, instruction, etc., and can vouch for your character and/or abilities.
- ❖ **Retain a copy of application materials for your records.**

SELECTION & NOTICE OF AWARD RECIPIENTS

Selections will be based on the applicant's overall academic progress, extracurricular activities, leadership skills, and participation in community activities. BCAC will notify applicants, in writing, of the results of the application and scholarship award process by first-class mail.

REVOCATION OF AWARD

BCAC reserves the right to revoke any scholarship award at any time if the applicant fails to meet or maintain academic standards or any other scholarship requirements or provides falsified information in connection with the application and/or scholarship award process.

****SUBMISSION OF APPLICATION****

**DEADLINE: Completed application materials
must be postmarked no later than April 15, 2021**

The completed application and all supporting materials (i.e., three (3) letters of recommendation, transcript, signature page, essay and checklist) **must** be mailed **as one packet** to:

Baltimore County Alumnae Chapter
Delta Sigma Theta Sorority, Inc.
P.O. Box 240
Randallstown, Maryland 21133
Attention: Scholarship Committee

Visit <http://www.bcacdeltas.org> for additional information regarding the Baltimore County Alumnae Chapter of Delta Sigma Theta Sorority, Incorporated.

Baltimore County Alumnae Chapter of Delta Sigma Theta Sorority, Incorporated does not discriminate on the basis of race, color, age, gender, nationality, religion, or disability with respect to access, employment, programs, or services.

SCHOLARSHIP APPLICATION

(Check One):

- ☐ L.E.A.D.
☐ Memorial

(Please print or type)

PERSONAL DATA

Last

First

Middle Initial

Name: _____

Date of Birth: _____

Age: _____

Gender: ☐ Male
☐ Female

Home address: _____

Email Address: _____

Telephone number: _____

Alternate telephone number: _____

Preferred/Best Contact Method: ____ (Phone) ____ (Email)

PARENT(S) OR GUARDIAN(S):

Name: _____

Name: _____

Relationship: _____

Relationship: _____

Address: _____

Address: _____

Telephone: _____

Telephone: _____

EDUCATION

Name of High School: _____

Address: _____

Expected Date of Graduation: _____

Grade Point Average (GPA): _____

List the names of three (3) colleges or universities (in order of preference) to which you have applied. Please also confirm the current acceptance status.

College/University	Accepted (Yes or No)
1.	
2.	
3.	

NOTE: if you are applying for the L.E.A.D. Scholarship, you must be accepted into and attend a Historically Black College or University (HBCU).

****You may attach additional pages as needed. Include your full name on any additional pages****

AWARDS, HONORS AND SAT/ACT SCORE

1. List any award and/or recognition that have you received, along with the name of the organization(s) from which you received the award and/or recognition.

Organization	Honor/Award
A.	
B.	
C.	

2. List your high school clubs and memberships, including leadership positions you hold:

Organization	Office
A.	
B.	
C.	

3. List community and organizational memberships, including leadership positions you hold:

Organization	Office
A.	
B.	
C.	

4. Provide your SAT/ACT score below, enclosing proper documentation that supports your SAT/ACT score in the application packet that you submit.

SAT (combined score): _____ **ACT (score):** _____

EMPLOYMENT

List any employment history, including the name of your employer, a contact person, your title, and the basic responsibilities of your job(s):*

Company: _____ Job Title: _____
Contact Person: _____ Telephone No: _____
Responsibilities: _____

Company: _____ Job Title: _____
Contact Person: _____ Telephone No: _____
Responsibilities: _____

COMMUNITY SERVICE

List any community service/volunteer work you have done, including the name of the company or organization, a contact person, the dates of service and the type of community service or volunteer work you performed.*

Company/Organization: _____ Date(s) of Service _____
Contact Person: _____ Telephone No: _____
Responsibilities: _____

Company/Organization: _____ Date(s) of Service _____
Contact Person: _____ Telephone No: _____
Responsibilities: _____

****You may attach additional pages as needed. Include your full name on any additional pages****

ESSAY

Prepare a narrative (containing at least 750 words) in which you discuss one of the following topics:

- ☐ Discuss the positive and negative impact of social media on you and/or those around you.
- ☐ Discuss a current event that has personally impacted you or about which you are passionate.
- ☐ Discuss what you believe to be the most important issue facing minority youth, why that issue is the most important, and make recommendations to effectively address that issue.

LETTERS OF RECOMMENDATION

Submit **three** (3) letters of recommendation written on **official letterhead** from individuals who have personally interacted with you through supervision, instruction or guidance. Each individual should be able to vouch for your character and/or your abilities/activities, and their contact information must be included for verification. Letters must be submitted in **separate**, individually sealed envelopes. Select individuals to provide your recommendation letters from the list below. **NOTE: At least one recommendation must be from an academic official* (i.e., principal, teacher, or advisor)**

- ◆ H.S. Principal*
- ◆ H.S. Teacher*
- ◆ H.S. Guidance Counselor/Advisor*

- ☐ Community Service Organization Personnel
- ☐ Minister, Pastor or Church Leader
- ☐ Civic Leader (i.e. Politician, Government Official, etc.)
- ☐ Mentor or Employer
- ☐ Youth Club or Youth Group Leader
- ☐ Coach

CERTIFICATION

I hereby declare that each of the following statements is true. I have included with the application all the requested additional documents **in sealed envelopes**. I will accept the decision of the Scholarship Committee of the Baltimore County Alumnae Chapter of Delta Sigma Theta Sorority, Incorporated in connection with this application process. If selected to receive a scholarship award, I acknowledge that my receipt of the award is contingent upon my acceptance, enrollment and continuous enrollment at a college or university. I further acknowledge that if awarded a L.E.A.D. scholarship, I **must** be accepted into and maintain enrollment at a HBCU.

Failure to fully complete the application as instructed will result in my disqualification from the application process.



Signature

Date