

JACKSONVILLE ALUMNAE CHAPTER
P.O. BOX 2435
JACKSONVILLE, FL 32203
www.dstjax.org

Congratulations on reaching this academic milestone! Delta Sigma Theta Sorority, Inc. is an organization dedicated to aiding in the education of talented youth throughout our community. We award eight \$2,000 college scholarships; one **Literary** Scholarship, two **Leadership** Scholarships, and five **Academic** Scholarships.

Requirements for the scholarship, application, and media waiver are included below. We wish you success as you continue your academic career!

BRENDA JACKSON LITERARY SCHOLARSHIP REQUIREMENTS:

- △ Applicant must be an African-American male or female.
- △ Must have a minimum acceptable G.P.A of 2.75 or higher on a 4.0 scale.
- △ Must demonstrate community involvement. This will be assessed by the number of volunteer/community service hours listed on the transcript (or other documentation).
- ▲ Must graduate at the end of the 2015-2016 academic school year from one of the following Duval County public high schools: William M. Raines; Jean Ribault; Andrew Jackson; or First Coast.
- ▲ Must attend an accredited institution of higher education after graduation.
- △ Must have taken the SAT and/or the ACT and submit proof with the application.
- △ Must submit **two (2) typed letters of recommendation**: One (1) letter must be from a high school staff member noting the student's interest in writing; and one (1) letter must be from a Community Service Organization in which you have performed service. Both letters must be signed and on the appropriate organization's letterhead.
- △ Must submit a typed **2-page maximum essay using 12 pt Times Roman font**. The essay shall demonstrate the applicant's knowledge base on topic, research skills, and proper use of the English language. Applicant's essay MUST respond to the following:

Recently, our nation has seen multiple televised videos demonstrating excessive use of force by policemen against unarmed teenagers. Write a letter to the Jacksonville Chief of Police outlining how these tragedies can be prevented in the future.

- △ Must complete and sign the scholarship application.
- △ Must sign the attached Dependent Acknowledgement Waiver and Media Waiver.
- △ Finalists will be selected by the scholarship committee based on scholarship requirements submitted.
- △ Finalists must participate in an interview before the Scholarship Committee. A member of the Scholarship Committee will contact you to schedule your interview.
- △ Students may only apply for **ONE** of the three scholarships offered.
- △ Dependents of members of Delta Sigma Theta Sorority, Inc. are <u>ineligible</u> to participate in the scholarship.



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Brenda Jac Student Information: (Please type or p		ry Scholarship	Application
Name:		DOB:	
E-mail			
Address			
City:	State:		Zip:
Home Phone:		Cell Phone:	
Parent/Guardian Name			
Parent/Guardian Phone Number:	<u> </u>		
Parent/Guardian is a member of If you circled YES, STOP HERE; Yo be completed by High School Guida High School:	ou are ineligible		Yes No
Guidance Counselor Name:		Signature:	
GPA (Unweighted/Weighted):			
Free or Reduced Lunch: Yes	No		
SAT (Total Score):		ACT (Total Score):	:
The information provided in my and accurate. I understand that a consideration of the scholarship information submitted as part of the Alumnae Chapter of Delta Sigma signing below, I agree to accept the Applicant Signature:	any false staten o award(s). I this application a Theta Sorority	nents in this applic also understand packet will become , Incorporated and	ation may disqualify me from and agree that any and all e property of the Jacksonville I will be kept confidential. By
Parent Signature:		Date:	

Applications must be postmarked by **March 27, 2016**. Incomplete Applications and those postmarked after March 27, 2016 will NOT be considered by the scholarship committee.



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DEPENDENT ACKNOWLEDGEMENT WAIVER

Signature of Parent Date	 e
Signature of Participant Date	e
BY MY SIGNATURE, I AM INDICATING THAT I HAVE READ AN FOREGOING INFORMATION.	ND UNDERSTAND THE
Delta Sigma Theta Sorority, Inc.	
forfeited and must be immediately returned in full to the Jackso	nville Alumnae Chapter of
of Delta Sigma Theta Sorority, Inc., any scholarship funds award	ded and/or received will be
that (print applicant's name) is	a dependent of a member
to participate in the scholarship and cannot receive scholarship	funds. If it is determined
I understand that dependents of members of Delta Sigma Theta S	Sorority, Inc. are ineligible
Sorority, Inc. (locally, nationally, or at-large).	
is my dependent and that she/he is NOT a dependent of a men	nber of Delta Sigma Theta
applicant (print applicant's name)	_ acknowledge that she/he
I, (print parent/guardian name)	



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MEDIA WAIVER



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Checklist:

- △ Completed, signed scholarship application
- △ Signed Dependent Acknowledgement Waiver
- △ Signed Media Waiver
- △ SAT and/or ACT documentation
- △ Documented Proof of Volunteer/Community Service Hours
- △ Official high school transcript
- ▲ Two (2) typed letters of recommendation
- ▲ Essay

Please note that electronic signatures will not be accepted.

COMPLETED PACKET MUST BE RECEIVED OR POSTMARKED BY MARCH 27, 2016

Mail Completed Application Packet to: Delta Sigma Theta Sorority, Inc. Jacksonville Alumnae Chapter ATTN: Scholarship Committee P.O. Box 2435 Jacksonville, FL 32203



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