Columbia (SC) Alumnae Chapter Delta Sigma Theta Sorority, Inc. SCHOLARSHIP APPLICATION ELEMENTARY, MIDDLE AND NON-GRADUATING HIGH SCHOOL STUDENTS

To be completed by Applicant:

Name:		Phone:		
Address:				
Street	City		State	Zip Code
Date of Birth:	Sex: F	M	Current Grade:	
Name and address of school currently attend	ding:			
Name of Guidance Counselor/Advisor				
Cumulative Grade Point Average:on _ (Please submit an OFFICIAL copy of your i		_		
Mother's Name:	Оссиј	pation:		
Father's Name:	Оссир	oation:		
Guardian's Name:	Occuj	pation:		
Are you currently participating in any progr If so, please name the program.	-	-	Sigma Theta Sorority	y, Inc.?
What is your favorite subject in school and	why?			
What extra curricular activities and volunted sheet if necessary.)	er services do	you currei	ntly participate in? (A	ttach additional
What career(s) do you think you will likely	pursue and wh	ny? (Attach	additional sheets if necess	sary.)

2019 Elementary, Middle and Non-Graduating High School Scholarship Application

Name 1.	Age
2.	
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Please submit a typed narrative of 250 words to current grade level. Attach on a separate sheet	
Elementary school (Grades 1-5): If you could c change and why?	hange one thing about your school, what would you
Middle school (Grades 6-8): Describe what you problem of our times and suggest a solution for t	consider to be the single most important societal hat problem.
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Non-graduating High school: Describe how you of school.	u have demonstrated leadership ability both in and out
of school.	u have demonstrated leadership ability both in and out
of school. I hereby declare that the information contained	
of school. I hereby declare that the information containe the best of my knowledge.	ed in this application is accurate and complete to
I hereby declare that the information contained the best of my knowledge. Applicant's Signature	Parent's or Guardian's Signature lication: counselor/advisor (signed and original) m/camp you would like to attend
Applicant's Signature Date Required Attachments to the Completed Appl 1. Reference letter from school guidance of the complete of the compl	Parent's or Guardian's Signature lication: counselor/advisor (signed and original) m/camp you would like to attend eport card