

Scholarship Application

Thank you for your interest in the Educational Development Scholarship Program of the Bolivar County Alumnae Chapter of Delta Sigma Theta Sorority, Inc. Our organization celebrates academic success yearly by rewarding deserving students with financial assistance through a competitive scholarship program open to all graduating high school seniors from designated area schools.

Please complete the following information. Scholarships will be awarded to the most deserving applicants.

First Name	Middle Name	Last Name
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Permanent Address	Name of Parent/Legal Guardian
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City	State	Zip Code
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Permanent Phone	Mobile Phone
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Email Address	Date of Birth
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High School	HS GPA	Class Rank
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College you plan to attend

1. Please list honors, achievements, awards received, office(s) held, and volunteer activities you have participated in.

2. Please list community service/extracurricular activities

3. Please describe yourself in three sentences.

In a Maximum of 500 words introduce yourself and explain why you deserve this scholarship. Include in the essay your strengths and aspiration for goal attainment.

Please attach any additional information you think would be pertinent to your application.

Applicant's Signature and Date

Please Submit Application to:
Attn: Mrs. Shawandra Burnett-Walker
Chair, Scholarship Committee – Education PPD Thrust
Bolivar County Alumnae Chapter
Delta Sigma Theta Sorority, Inc.
P.O. Box 1421
Cleveland, MS 38732-1421

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Bolivar County Alumnae Chapter Scholarship Application
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