

**EASTERN PANHANDLE ALUMNAE CHAPTER  
DELTA SIGMA THETA SORORITY, INC.**

**BOOK SCHOLARSHIP APPLICATION**

**BACKGROUND:**

The Eastern Panhandle Alumnae Chapter of Delta Sigma Theta Sorority, Inc. was chartered in April 2007 and serves Jefferson and Berkeley Counties. It is a public, nonprofit organization composed of college educated women. The Sorority was organized in 1913 at Howard University by African-American women. Today, there are over 250,000 thousand members in all states and many foreign countries.

**AWARD:**

A \$500 scholarship for the purpose of purchasing college textbooks will be awarded to a deserving young man and a deserving young woman graduating from an accredited high school in Berkeley County and Jefferson County.

**ELIGIBILITY:**

To be considered for the scholarship, you must meet the following criteria:

1. A male or female graduate from an accredited high school in Berkeley or Jefferson Counties, West Virginia
2. Enter a four-year college or university as a fulltime freshman in the fall of 2019
3. Have a minimum cumulative grade point average of 3.0 on a 4.0 grading scale

**APPLICATION PROCEDURE:**

Your application must include the following:

1. EPAC Book Scholarship Application
2. An autobiographical letter to the Scholarship Committee - The letter should contain, but is not limited to school and community involvement, collegiate goals, personal interests, employment, etc.
3. Official school transcript that includes SAT or ACT scores

**The completed application packet must be postmarked by March 1, 2019 and mailed to the address below. Late and/or incomplete application packets will not be considered. All information is considered confidential. The 2019 recipient will not receive the scholarship award until proof of enrollment is provided to the Chapter by the college.**

**Please mail to:  
EPAC-DST Scholarship Committee  
P.O. Box 819  
Charles Town, WV 25414**

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BOOK SCHOLARSHIP APPLICATION  
March 1, 2019**

*Directions: Please type or print your information on the blanks provided. You may attach additional sheets if needed. Put your name at the top of each additional sheet submitted.*

<b>STUDENT INFORMATION</b>			
<b>Last Name:</b> _____	<b>First Name:</b> _____	<b>Middle Name:</b> _____	
<b>Mailing Address:</b> Street & Apt. # _____			
<b>City:</b> _____	<b>State:</b> _____	<b>Zip Code:</b> _____	
<b>Home Phone Number:</b> _____	<b>Cell Phone Number:</b> _____		
<b>Email Address:</b> _____			
<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female			
<b>PARENT/GUARDIAN INFORMATION</b>			
<b>Who does the student currently live with?</b> <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both <input type="checkbox"/> Guardian			
<b>Mother/Female Guardian</b>			
Name: _____ Phone Number: _____ (    ) Home (    ) Cell			
Mailing Address (Street & Apt #): _____			
City: _____ State: _____ Zip Code: _____			
Email Address: _____			
<b>Father/Male Guardian</b>			
Name: _____ Phone Number: _____ (    ) Home (    ) Cell			
Mailing Address (Street & Apt #): _____			
City: _____ State: _____ Zip Code: _____			
Email Address: _____			
<b>COLLEGE INFORMATION</b>			
<i>List the college that you plan to attend and your intended major.</i>			
First Choice: _____			
Second Choice: _____			
Intended Major: _____			

## SCHOOL INFORMATION

Please provide a copy of your high school transcript with official school seal and ACT and/or SAT scores.

**Name of High School:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Grade Point Average:** Calculate the student's cumulative grade point average

\_\_\_\_\_ /4.0 Unweighted GPA

\_\_\_\_\_ /4.0 Weighted GPA

**Standardized Test Scores:** Confirm that the student is registered to take or has taken the SAT or ACT during the 2016-2017 academic school year:

**SAT:** Test Date \_\_\_\_\_ Evidenced Based Reading & Writing \_\_\_\_\_ Math \_\_\_\_\_

**ACT:** Test Date \_\_\_\_\_ English \_\_\_\_\_ Math \_\_\_\_\_ Reading \_\_\_\_\_ Science \_\_\_\_\_ Composite \_\_\_\_\_

**Counselor's Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

## EXTRACURRICULAR ACTIVITIES

*List or provide an attachment of school and community organizations in which you have participated during high school.*

**Activity**

**Year(s) You Participated  
(e.g., grades 9-12)**

**Office(s) Held**

Activity	Year(s) You Participated (e.g., grades 9-12)	Office(s) Held

## HONORS, AWARDS, AND RECOGNITIONS

*List the honors, awards and any other recognition that you have received and the dates you received them.*


## PERSONAL STATEMENT

Please provide an autobiographical letter to the Scholarship Committee. The letter should contain, but is not limited to school and community involvement, collegiate goals, personal interests, employment, etc.

## CERTIFICATION

*By the signatures below, you affirm that all of the information that you provide is true and complete to the best of your knowledge. Misrepresentation or the submission of inaccurate or incomplete information will result in disqualification or forfeiture of any award.*

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_