REQUIREMENTS

Application: This application must be accurate, legible, and complete.

1. An application and typed essay (handwritten essays will not be reviewed)
2. A copy of the student's official high school transcript
3. A valid copy of SAT, ACT, ASSET/COMPASS scores
 4. Letters of reference: one from each of the following categories: 1. Applicant's assigned teacher or counselor, or administrator 2. Applicant's church or work, or civic organization (Each letter of reference must be on a letterhead and must have original signature. No electronic signatures)
5. An applicant may apply and qualify for more than one type of scholarship, but he or she will only receive ONE (1) scholarship/award (not to exceed \$1,000)
6. Please provide proof of income, tax return, W2 form, or appropriate documentation for Need to Succeed Award. (Please mark out Social Security number and bank information).
7. One-to-two-page essay with a minimum of 500 words.
8. Completed application package must be postmarked by April 15, 2025
Scholarships: Check (□) your selection(s)
1. Warner Robins Alumnae Chapter Academic Excellence Award (\$1000) ☐ Must be a graduating Senior ☐ Must have a cumulative grade point average of 3.0 or higher
2. Warner Robins Alumnae Chapter Faye Harden Scholarship (\$1,000) ☐ Must be a graduating Senior ☐ Must be a Perry resident or attend a Historically Black College or University
3. Warner Robins Alumnae Chapter Carolyn Buford Need to Succeed Award
(\$1,000) ☐ Must be a graduating senior
☐ Must have a cumulative grade point average of 2.75 or higher
☐ Must demonstrate an economic need (household income below \$40,000) * *Must present documentation of earned income or financial standing

WARNER ROBINS ALUMNAE CHAPTER DELTA SIGMA THETA SORORITY, INC. WARNER ROBINS, GEORGIA

SCHOLARSHIP APPLICATION

(Accepting Houston, Bleckley and Pulaski Counties' Applicants)

(This form must contain accurate and legibly written information.)

PART I: PERSONAL	DATA	
Name		
(Last)	(First)	(Middle)
Date of Birth		
(Month)	(Day)	(Year)
Present Address:		
(Number and Street)	(City/County/State)	(Zip Code)
Telephone Number ()	
Email Address		
Name and Address of A	pplicant's High School:	
	VS THE NAME AND ADDRES YOU PLAN TO ATTEND:	SS OF THE COLLEGE

*If your college of choice changes prior to acceptance of an award, please notify the Warner Robins Alumnae Chapter as soon as possible. <u>Lack of notification could result in the loss of scholarship.</u>

PART II: FAMILY DATA		
Mother(s) Name		
Mother(s) Occupation		
Mother(s) Business Address		
Father(s) Name		
Father(s) Occupation		
Father(s) Business Address		
Son/Daughter of member of Warner		
Sigma Theta Sorority, Inc. { }Yes {	{ }No	
Salary: Parent's combined yearly inco	ome (select only one)	
\$00,000 - \$09,999	\$ 60,000 - \$69,999	
\$10,000 - \$19,999	\$ 70,000 - \$79,999	
\$20,000 - \$29,999	\$ 80,000 - \$89,999	
\$30,000 - \$39,999	\$ 90,000 - \$99,999	
\$40,000 - \$49,999	\$100,000 - Above	
\$50,000 - \$59,000 *A proof of income, tax return, W2 form, of	er annyonviate documentation mus	t ha
provided to apply for the Ne Social Security number and	<mark>ed to Succeed Award.</mark> (<mark>Please mar</mark>	<mark>k out</mark>
List the name and age of all children	living in the home.	
_	_	Age
Full Name Age	Full Name	Age
Full Name Age 1)	Full Name _ 4)	
Full Name Age	Full Name 4) 5)	
Full Name Age 1)	Full Name 4) 5) 6)	
Full Name Age 1)	Full Name 4) 5) 6) Number of children in college	ge
Full Name Age 1)	Full Name 4) 5) 6) Number of children in college	ge
Full Name Age 1)	Full Name 4) 5) 6) Number of children in college	ge
Full Name Age 1)	Full Name 4) 5) 6) Number of children in college	ge
Full Name Age 1)	Full Name 4) 5) 6) Number of children in college	ge
Full Name Age 1)	Full Name 4) 5) 6) Number of children in college	ge
Full Name Age 1)	Full Name 4) 5) 6) Number of children in college	ge
Full Name Age 1)	Full Name 4) 5) 6) Number of children in college	ge

PART III: SCHOOL DATA
How are you ranked in your senior class? (e.g., 10 th out of a class of 250)
What extracurricular activities have you participated in within the past three
years? (e.g., school, church, work, and community) Please list the
involvement (s) and your leadership positions – past and present.
What honors, awards, and scholarships have you received?
What is your desired college major (e. g, mathematics, education, business, medicine, and engineering) and what are your career plans/goals?
Additional Comments:

PART IV: ESSAY Explain your interest to provide worthwhile contributions and community services at present and in the future.
 This essay must be prepared in Microsoft Word and adheres to and formatted as the following: One to two pages typed – no handwritten essays. Double line spacing Times New Roman font12-point size. Margin of 1 inch all around Assessment for appearance, grammar, and spelling
I certify that all information in this application is accurate, complete, and may be verified upon request. I also understand by signing the application, I am giving Warner Robins Alumnae Chapter of Delta Sigma Theta Sorority, Inc permission to post my picture on the chapter's social media pages and publications.

Please mail completed application to:

Date

Date

Warner Robins Alumnae Chapter Delta Sigma Theta Sorority, Inc. Attn: Cathy D. Johnson/Michele Boone P.O. Box 6861 Warner Robins, Georgia 31095-6861

Student's Signature

Parent's Signature

Scholarship Application Checklist

1.	Application enclosed (handwritten essays will not be reviewed)
2.	A copy of student's official high school transcript included.
3.	A valid copy of your SAT I, ACT scores, and if applicable, the ASSET/COMPASS test scores.
4.	Two (2) reference letters on stationery with letterhead
	(1) Applicant's assigned teacher or counselor or
	administrator
	(1) Applicant's church or work, or civic organization
	Each letter of reference must be on a letterhead and must have
	original signature. No electronic signatures)
5.	Check type of scholarship selected on the <i>Requirements Form</i>
6.	Proof of parent(s) income, tax return, W2 form, or appropriate documentation for Need to Succeed Award only. (Please mark out Social Security number and bank information).
7.	One-to-two-page essay enclosed (minimum of 500 words).
8.	This application package must be <i>postmarked by April 15</i> , 2025.
9.	Incomplete applications WILL NOT be evaluated.