



## Delta Sigma Theta Sorority, Inc.

Tracy Area Alumnae Chapter

A Public Service Sorority

P.O. Box 1240

Tracy, CA95378

December 6, 2016

To Whom it may concern:

Delta Sigma Theta Sorority, Incorporated, is a non-profit organization. The Tracy Area Alumnae Chapter of Delta Sigma Theta Sorority, Inc. would like to award scholarships to high school seniors in our service area to promote the pursuit of higher education among African-American students.

We are asking for your assistance by distributing the enclosed scholarship packages to African-American seniors who are planning to attend an accredited two or four year college or university. The scholarship packages **must** be postmarked by **Friday, February 17, 2017**. Please feel free to duplicate the scholarship packet to accommodate all qualified students.

Any questions regarding the scholarships, this process, or the attached documents may be directed to Lisa Woody-Williams, Scholarship Chair, at (209) 321-2318 or email us at [tracyareaalumnae@yahoo.com](mailto:tracyareaalumnae@yahoo.com). Thank you for your support.

Yours in Community Spirit,

*Lisa Woody-Williams,*  
Vice President &  
Chair Scholarship Committee  
Tracy Area Alumnae Chapter



**TRACY AREA ALUMNAE CHAPTER  
DELTA SIGMA THETA SORORITY, INC.  
SCHOLARSHIP APPLICATION PACKAGE**

To: All Tracy, Manteca, Lathrop, Mountain House, Brentwood, Salida, Ripon, Patterson, and French Camp African-American High School Seniors

From: Scholarship Committee

Date: December 6, 2016

Re: Request for Scholarship Package Submittal

---

The Tracy Area Alumnae Chapter of Delta Sigma Theta Sorority, Incorporated is currently accepting scholarship applications from Tracy, Manteca, Lathrop, Mountain House, Brentwood, Salida, Ripon, Patterson, and French Camp high school seniors. Applicants must be of African-American descent. Immediate family members of Tracy Area Deltas (members of Delta Sigma Theta Sorority, Inc.) are only eligible for the memorial scholarship.

**To be considered for a possible interview and potential award of a scholarship, all of the following items must be postmarked by February 17, 2017 to:**

Delta Sigma Theta Sorority, Tracy Area Alumnae Chapter  
C/O: Lisa Woody-Williams  
P.O. Box 1240  
Tracy, CA 95378

1. Scholarship application (2 pages).
2. An official transcript (must be received in a sealed envelope). The transcript must be embossed with the school seal. ***Request official transcripts from your school as soon as possible!***
3. Two (2) letters of recommendation from the following:
  - a) One from church, civic or community group in which the student is/was involved.
  - b) One from a high school teacher, counselor, or principal.
4. A typewritten autobiographical essay. Please include your educational and professional goals with an explanation of how you plan to achieve these goals. (Essay should be at least one full page, not to exceed 500 words)
5. A photograph (suggested size not to exceed a 4" x 6" snapshot).

***Note: If any of the items listed above are missing from your package, you will not be considered for an interview and scholarship.***

For more information about Delta Sigma Theta Sorority, Inc., please visit the website at [www.deltasigmatheta.org](http://www.deltasigmatheta.org). For more information about the Tracy Area Alumnae Chapter, please visit: [www.tracyareadeltas.com](http://www.tracyareadeltas.com)

Thank you and good luck!  
**Eligibility Requirements**

**Memorial Scholarship:** Chantay M. Murray Scholarship

- A relative must be a member of Tracy Area Alumnae Chapter
- High School Senior accepted for admission in a two or four year degree granting college/university
- Field of study Human Services (i.e. Social Work, Social Welfare, Psychology, Sociology, Behavioral Sciences)
- Demonstrate community volunteerism within your school or community
- Have a minimum cumulative grade point average of 2.5

**General Scholarship:**

- Must be a resident of Tracy, Manteca, Lathrop, Mountain House, Brentwood, Salida, Ripon, Patterson, and French Camp
- High School Senior accepted for admission in a two or four year degree granting college/university
- Demonstrate community volunteerism within your school or community
- Have a minimum cumulative grade point average of 2.5

**Define:**

**\*\*Delta Membership:** A member is a Soror who is in good standing with the Tracy Area Alumnae Chapter

**\*\* Relative:**Relative is defined as immediate family members, including legally adopted child or person for which you serve as legal guardian, including foster children, step children, parents, grandparent(s), brothers, sisters, daughters, sons, nieces, nephews

**TRACY AREA ALUMNAE CHAPTER  
DELTA SIGMA THETA SORORITY, INC.  
SCHOLARSHIP APPLICATION**

**Deadline: Friday, February 17, 2017**

(Please print in pen or type information.)

Applicant's Full Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone # \_\_\_\_\_

Applicant living with (check one):

Both Parents \_\_\_\_\_

Mother \_\_\_\_\_

Father \_\_\_\_\_

Guardian \_\_\_\_\_

**BACKGROUND**

Mother's or Guardian's  
Name \_\_\_\_\_ Occupation \_\_\_\_\_

Father's or Guardian's  
Name \_\_\_\_\_ Occupation \_\_\_\_\_

Other dependent sisters or brothers living at home or in college:

Name	Age	School/College	Grade/Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Use additional paper if necessary)

Are there any unusual family circumstances that should be considered? Explain and use additional paper if necessary.

---

---

---

---

---

**EDUCATIONAL AND OTHER INFORMATION**

Applicant’s Full Name \_\_\_\_\_

Name of High School \_\_\_\_\_

What is your cumulative grade point average? \_\_\_\_\_

(Minimum required: 2.5 on a 4.0 scale and 3.5 on a 5.0 scale)

Are you applying to a two-year or four-year college?

Circle one:    2 year   4 year    Name of college(s)

\_\_\_\_\_

Activities Awards and/or Honors:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

High School Activities:

\_\_\_\_\_  
\_\_\_\_\_

Community and/or Church Service Activities:

\_\_\_\_\_  
\_\_\_\_\_

List names and amount of scholarships that you have been awarded:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you applied for scholarships with any other Chapters of Delta Sigma Theta Sorority, Inc.? If so, which chapters?

\_\_\_\_\_  
\_\_\_\_\_

Return all scholarship application documents to Delta Sigma Theta Sorority, Inc., Tracy Area Alumnae Chapter P.O. Box 1240, Tracy, CA 95378.

Included in my packet are (check each): Application     Transcript     Letters of Recommendation (2)     Essay

\*\*\*\*\*  
FOR USE BY TRACY AREA ALUMNAE CHAPTER, DELTA SIGMA THETA SORORITY, INC ONLY:  
\*\*\*\*\*

Accepted        Interview Date and Time: \_\_\_\_\_

Rejected        Reason for rejection: \_\_\_\_\_    Date returned: \_\_\_\_\_