

**Delta Life Development Foundation, Incorporated**  
**P. O. Box 12346**  
**Columbus, Georgia 31917-2346**  
**www.dldfoundation.org**

Dear Senior Counselor,

Enclosed in this mailing are scholarship application packets for distribution to eligible high school seniors. While you and your students are welcome to use the hardcopy version, this year we encourage you and your students to access the application using our *new* online application tool. You can access the tool by following the link on the Delta Life Development Foundation website ([www.dldfoundation.org](http://www.dldfoundation.org)). The scholarship program is the combined efforts of the Delta Life Development Foundation, Inc., and Columbus (GA) Alumnae Chapter of Delta Sigma Theta Sorority, Inc. This program is highly competitive and provides one-time general aid scholarships and renewable career-targeted (teacher-education) scholarships to high school students who have demonstrated academic excellence and participated in community service projects.

Recipients of Delta Life Development Foundation Scholarships are selected based upon their academic achievement, extracurricular and community service activities, leadership skills, recommendations, as well as written and oral communication skills. We respectfully ask that senior counselors **do not issue the link or submit** scholarship packets for students who have **less than a 3.0 grade point average**.

Eligible students planning to attend a technical college, two-year and/or four-year college/ university should notate this information on the scholarship application in the places noted.

An application instruction sheet is available on the website and enclosed in each scholarship application packet. Please encourage applicants to follow the instructions very carefully and adhere to the required **deadline (postmark date for mailings), Thursday, January 31, 2019**. All information (completed application form, three recommendation forms, transcript in a sealed envelope, typed essay, typed resume-optional, etc.) must be submitted as a single and complete packet. Failure to do so will disqualify the application. If an applicant is selected for an interview, the **interview date** is scheduled for **Saturday, April 6, 2019**.

Senior Counselors, it is extremely important that the applicant's **grade point average** and **SAT or ACT scores** are included **on the scholarship application form** and **on the high school transcript**. The **senior counselor must sign the scholarship application** certifying that all written academic information is correct. Also, either **the senior counselor, assistant principal, or principal must complete a recommendation form** for each applicant.

The members of the Scholarship Committee greatly appreciate your time and assistance in distributing the application link or packets. We hope you will access the applications online. Should you need additional application packets, please leave a message at 706-563-2390 or e-mail [DLDF2005@gmail.com](mailto:DLDF2005@gmail.com). We will be glad to assist you with your request.

Sincerely,

Chair, Scholarship Committee



## SCHOLARSHIP APPLICATION FORM 2018-2019

### FILL IN COMPLETELY AND RETURN VIA MAIL

(See back cover for address)

- Please check if you are attending a Technical College
- Please check if you are attending a College/University
- Please check if you are applying for a Teacher Education Scholarship

Name: \_\_\_\_\_  
Last First Middle

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Apt.# City State Zip Code

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  Female  Male  
Month Day Year

Parent (s) or Guardian: \_\_\_\_\_  
Name Address Relationship

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

\*SAT Score: \_\_\_\_\_ \*ACT Score: \_\_\_\_\_ \*High School Grade Point Average: \_\_\_\_\_

Diploma Seal of Endorsement (check one):  College Prep  Technology/Career  Technology Prep

Do you have a relative who is a member of Delta Sigma Theta Sorority, Inc.?  yes  no

Name of Member \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

List schools to which you have submitted applications (College or University):  
\_\_\_\_\_  
\_\_\_\_\_

List schools to which you have received letters of acceptance:  
\_\_\_\_\_  
\_\_\_\_\_

Name area(s) of interest (intended major/degree) you desire to pursue in a post-secondary institution:  
\_\_\_\_\_  
\_\_\_\_\_

List any sources of financial aid (grant, scholarship, work study, etc.) you have applied (or will apply) for and /or received to date:  
\_\_\_\_\_  
\_\_\_\_\_

**\*THIS ACADEMIC ACHIEVEMENT INFORMATION MUST BE INCLUDED ON YOUR HIGH SCHOOL TRANSCRIPT; OTHERWISE, YOUR APPLICATION WILL BE DISQUALIFIED.**



# DELTA LIFE DEVELOPMENT FOUNDATION, INC.

## REQUIRED INFORMATION\*

COMPLETE THE FOLLOWING LIST OF ACTIVITIES. ONLY INCLUDE THE LAST FOUR YEARS.

Indicate any OFFICES HELD or LEADERSHIP POSITIONS to include the NUMBER OF YEARS in each activity.

- I. HIGH SCHOOL EXTRA-CURRICULAR ACTIVITIES \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- II. HONORS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- III. AWARDS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- IV. COMMUNITY SERVICE AND/OR VOLUNTEER ACTIVITIES \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- V. RELIGIOUS OR CHURCH ACTIVITIES \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- VI. ARE YOU A MEMBER OF ANY NATIONAL, STATE, AND/OR LOCAL TEEN ORGANIZATION(s)?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- VII. HOBBIES AND TALENTS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- VIII. WORK EXPERIENCE \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant has answered all questions on this application form; if appropriate, not applicable (N/A) has been written.

(\*Applicants are encouraged to **type** the **ABOVE required information list** AND **attach a copy.**)



# DELTA LIFE DEVELOPMENT FOUNDATION, INC.

## SCHOLARSHIP RECOMMENDATION FORM

***MUST BE SUBMITTED BY CHURCH, COMMUNITY OR OTHER SCHOOL PERSONNEL  
WHO KNOWS YOU WELL***

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Please evaluate the applicant on the following characteristics using a scale of 1-5:

*(1) Below Average (2) Average (3) Good (4) Excellent (5) Superior or (N/A) Not able to make an evaluation*

1. **Communicates well with others** \_\_\_\_\_
2. **Is prompt** \_\_\_\_\_
3. **Performs well under stressful conditions** \_\_\_\_\_
4. **Demonstrates good citizenship** \_\_\_\_\_
5. **Is supportive of the school, community, and /or church program** \_\_\_\_\_
6. **Works cooperatively with others** \_\_\_\_\_
7. **Strives toward his/her greatest academic potential** \_\_\_\_\_
8. **Demonstrates sensitivity** \_\_\_\_\_
9. **Has a pleasing personality** \_\_\_\_\_
10. **Give an overall rating of the applicant** \_\_\_\_\_

Additional Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Evaluators Signature

\_\_\_\_\_  
Position or Title



# DELTA LIFE DEVELOPMENT FOUNDATION, INC.

## SCHOLARSHIP RECOMMENDATION FORM

***MUST BE SUBMITTED BY CHURCH, COMMUNITY OR OTHER SCHOOL PERSONNEL WHO KNOWS YOU WELL***

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Please evaluate the applicant on the following characteristics using a scale of 1-5:

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- 1. **Communicates well with others** \_\_\_\_\_
- 2. **Is prompt** \_\_\_\_\_
- 3. **Performs well under stressful conditions** \_\_\_\_\_
- 4. **Demonstrates good citizenship** \_\_\_\_\_
- 5. **Is supportive of the school, community, and /or church program** \_\_\_\_\_
- 6. **Works cooperatively with others** \_\_\_\_\_
- 7. **Strives toward his/her greatest academic potential** \_\_\_\_\_
- 8. **Demonstrates sensitivity** \_\_\_\_\_
- 9. **Has a pleasing personality** \_\_\_\_\_
- 10. **Give an overall rating of the applicant** \_\_\_\_\_

Additional Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Evaluators Signature

\_\_\_\_\_  
Position or Title



# DELTA LIFE DEVELOPMENT FOUNDATION, INC.

## SCHOLARSHIP INSTRUCTION SHEET

### REQUIREMENTS

1. You must answer **all** questions on the application form, using 'Not Applicable' (*N/A*) when appropriate. **Failure to do so will disqualify your application.**
2. **Three** recommendation forms must be submitted. **Failure to do so will disqualify your application.**  
**One must be from the Principal/Asst. Principal or Guidance Counselor (Senior Counselor preferred).** You may use church, community, or other school personnel for the other two (2) recommendations. **Failure to do so will disqualify your application.**
3. You must submit an official high school transcript (*affixed with the school seal*) and place in a sealed envelope. Your guidance counselor will assist you with the procedure. **Failure to do so will disqualify your application.**
4. Your grade point average (*GPA Requirement of 3.0 or higher*) and your SAT/ACT must be included **on the application form and on the high school transcript. The high school transcript must include an official school seal and be certified by the school counselor. Failure to do so will disqualify your application.**
6. All information (*application form, recommendation forms, sealed transcript, essay, typed resume (optional) etc.*) must be submitted in one packet. **Failure to do so will disqualify your application.**
7. Your packet must be postmarked and received in the post office no later than **THURSDAY, JANUARY 31, 2019.**

### EVALUATION PROCEDURES

1. Applicants will be evaluated on academic achievement, school and community service activities, leadership and character, written essay, and an in-person interview.
2. The application is a part of the evaluation process; therefore, it must be complete. Please remember to answer all questions on the application using "Not Applicable" (*N/A*), if appropriate.
3. At the time of the interview, each of the finalists must have made application to and received acceptance letter from an accredited post secondary institution. Please plan accordingly, interviews are scheduled for one day only, **Saturday, April 6, 2019.**
4. Scholarship Awards will be announced at the Annual Award Ceremony and Senior Teens Seminar. Finalist must be present for the Scholarship Awards announcement at the Ceremony and Seminar, **Sunday, April 28, 2019. Failure to attend will impact your eligibility to receive an award.**



**DELTA LIFE DEVELOPMENT FOUNDATION, INC.**  
**SCHOLARSHIP RECOMMENDATION FORM**

***MUST BE SUBMITTED BY THE PRINCIPAL/ASST. PRINCIPAL OR COUNSELOR  
(SENIOR COUNSELOR PREFERRED)***

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Please evaluate the applicant on the following characteristics using a scale of 1-5:  
*(1) Below Average (2) Average (3) Good (4) Excellent (5) Superior or (N/A) Not able to make an evaluation*

- 1. **Communicates well with others** \_\_\_\_\_
- 2. **Is prompt** \_\_\_\_\_
- 3. **Performs well under stressful conditions** \_\_\_\_\_
- 4. **Demonstrates good citizenship** \_\_\_\_\_
- 5. **Is supportive of the school, community, and /or church program** \_\_\_\_\_
- 6. **Works cooperatively with others** \_\_\_\_\_
- 7. **Strives toward his/her greatest academic potential** \_\_\_\_\_
- 8. **Demonstrates sensitivity** \_\_\_\_\_
- 9. **Has a pleasing personality** \_\_\_\_\_
- 10. **Give an overall rating of the applicant** \_\_\_\_\_

Additional Comments \_\_\_\_\_

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

\_\_\_\_\_  
Evaluators Signature

\_\_\_\_\_  
Position or Title

**ESSAY: Write at least 250 words stating your interest in the scholarship, the reason you want to attend college and how this scholarship could assist you in preparation for your future career.**

***(Applicants are encouraged to type their essay in the space below or attach a printed copy.)***



# SCHOLARSHIP INFORMATION CHECKLIST

Please check your scholarship application packet verifying that all requirements have been met.  
 Incomplete applications will not be considered.

- |       |       |  |   |
|-------|-------|--|---|
| YES   | NO    |  | 1. Attached in a sealed envelope is an official copy <u>WITH THE SCHOOL SEAL</u> of your high school transcript which includes your current GPA and SAT/ACT score.  |
| _____ | _____ |  |   |
| _____ | _____ |  | 2. Attached is a <u>Signed</u> Recommendation Form that must be from your <b>Counselor (Senior Counselor preferred) or Principal/Asst. Principal</b> noting academic achievement, character, personality traits, and special talents. |
| _____ | _____ |  | 3. Attached are TWO <u>Signed</u> Recommendation Forms completed by persons, other than relatives, who know you well.   |
| _____ | _____ |  | 4. The <b>application has been Signed</b> by the counselor verifying your GPA and SAT/ACT score.  |
| _____ | _____ |  | 5. Applicant has <u>Signed</u> the application.   |
| _____ | _____ |  | 6. All questions have been answered on the application form and not applicable (n/a) has been written, if appropriate.  |

ALL INFORMATION PROVIDED ON THIS SCHOLARSHIP APPLICATION SHALL BE HELD IN STRICT CONFIDENCE AND SHALL NOT BE RELEASED TO ANY PRIVATE OR PUBLIC SOURCE. PERMISSION IS GIVEN TO THE SCHOLARSHIP COMMITTEE TO VERIFY THE INFORMATION PRESENTED IN THIS APPLICATION AND TO USE INFORMATION AND PHOTOS FOR FUTURE PRINT AND MEDIA ADVERTISEMENTS

\_\_\_\_\_  
 Applicant's Signature

\_\_\_\_\_  
 Signature of Senior Counselor

**DO NOT WRITE BELOW THIS LINE**

Action Taken                      Accepted (    )              Denied (    )              Canceled (    )

Date \_\_\_\_\_

Comments \_\_\_\_\_

Date Requested \_\_\_\_\_ Date Received \_\_\_\_\_

## FORWARD SCHOLARSHIP INFORMATION TO:

**DELTA LIFE DEVELOPMENT FOUNDATION, INC.**  
**CHAIRPERSON SCHOLARSHIP COMMITTEE**  
**P.O. Box 12346**  
**COLUMBUS, GA 31917-2346**

FOR ADDITIONAL INFORMATION PLEASE CONTACT  
**AUDREY HOLLINGSWORTH (706) 243-4460**  
**DLDF2005@GMAIL.COM**