



*Delta Sigma Theta Sorority, Inc.*  
*A Public Service Sorority*  
*Alaska Alumnae Chapter*

February 2021

Dear Graduating Senior:

The Alaska Alumnae Chapter of Delta Sigma Theta Sorority, Inc. takes great pride in offering annual scholarships to Minority high school students pursuing higher education. Our scholarships are not limited to a specific field of study or career objective, and thus, may be used to pursue any academic discipline. Our Mission is to accelerate the progress of the Minority adolescent into mainstream America by opening doors to a wide spectrum of professions, while instilling a strong dedication to public service.

We are currently seeking high school seniors of Minority descent, who either live or attend school in the Municipality of Anchorage, and can show intent to enter a four-year college or university in the fall of 2021. Applicants must excel academically, exhibit exceptional leadership potential, and demonstrate proof of participation in community service activities. All who meet these eligibility requirements are encouraged to apply.

Delta Sigma Theta Sorority, Inc. is a global organization founded on Christian principles, emphasizing sisterhood and public service. As a public service sorority, we are committed to establishing and maintaining a high standard of morality and scholarship among women. The sorority is a sisterhood of more than 200,000 predominately African American, college educated women with over 1,000 chapters throughout the United States and the world, including Japan, Europe, Jamaica and the Republic of Korea.

We look forward to supporting you in your academic endeavors.

Sincerely,

Felisa Wilson  
Chair, Roberta Hutchinson Memorial Scholarship Committee

*P O Box 141885, Anchorage, Alaska 99514-1885*  
*[dstalaskaalumnae@gmail.com](mailto:dstalaskaalumnae@gmail.com)*  
*(907)566-2918*

**Alaska Alumnae Chapter, Delta Sigma Theta Sorority, Inc.**

**A Public Service Sorority**

**Alaska Alumnae Roberta Hutchinson Memorial Scholarship**

for Graduating Minority High School Seniors

Application Deadline: **April 15, 2021, 11:59PM**

Application **Must be Postmarked by April 15, 2021**

Scholarships are awarded based on academic performance, personal essay, honors and activities, letters of recommendation and financial need. The award will not exceed \$1000.00. Payment will be made directly to the post-secondary academic institution upon verification of enrollment. *Submitted packets in their entirety become the property of the Alaska Alumnae Chapter and **will not be returned.***

**To qualify for the Alaska Alumnae Roberta Hutchinson Memorial Scholarship, the applicant must meet or exceed all of the following minimum qualifications:**

1. Be a 2021 Anchorage School District Minority high school graduating senior
2. Possess a minimum grade point average of 2.5 on a 4.0 scale
3. Plan to enroll in a postsecondary school/college/university for the 2021 - 2022 academic year.

**Materials to be included with the application include:**

1. An official transcript (in a sealed envelope).
2. Two letters of recommendation.
3. Personal statement not exceeding 500 words.
4. A current color photo not to exceed (minimum wallet size or digital). The photo should be enclosed in an envelope and attached to the application or attached to the email submission

Email completed application to [DSTAlaskaAlumnae@gmail.com](mailto:DSTAlaskaAlumnae@gmail.com) or Mail completed application package to:

**Alaska Alumnae Chapter  
Delta Sigma Theta Sorority, Inc.  
Roberta Hutchinson Memorial Scholarship Committee  
P O Box 141885  
Anchorage, AK 99514-1885**

**Packet must be postmarked no later than (April 15, 2021) to be considered.**

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**Personal Information:**

NAME:

(Last) (First) (MI) Address: \_City: \_Zip Code: Mailing Address (If different):

Phone: Cell Phone: Email:

Gender: Female: Male: Date of Birth:

**School Information:**

School Currently Attending:

Current Cumulative Grade Point Average: \_Graduation Date: Class Rank Class Size

**SAT**             **ACT**     Date V/CR Math Writing Date Composite Score

Intended Degree/Career Interest:

Name

(Last) (First) (MI)

**ALASKA ALUMNAE ROBERTA HUTCHINSON MEMORIAL SCHOLARSHIP APPLICATION**  
**SCHOOL/WORK/COMMUNITY**

*(REQUIRED FORMAT – Do not create your own format)*

\*print additional forms as needed\*

**SCHOOL**

List all school related activities

SCHOOL ACTIVITY	Year(s) of Participation			Leadership List any titles or positions of leadership held	Year(s) of Leadership		
	Check the box corresponding to each year participated/served				In which years did you serve in a position of leadership?		
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR

Name \_\_\_\_\_  
 (Last) (First) (MI)

**ALASKA ALUMNAE ROBERTA HUTCHINSON MEMORIAL SCHOLARSHIP APPLICATION**  
**SCHOOL/WORK/COMMUNITY**

*(REQUIRED FORMAT – Do not create your own format)*

\*print additional forms as needed\*

**WORK**

List all jobs (paid or unpaid)

JOBS	Year(s) of Participation			Leadership List any titles or positions of leadership held	Year(s) of Leadership		
	Check the box corresponding to each year participated/served				In which years did you serve in a position of leadership?		
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR
	FR	SO	JR		FR	SO	JR

**ALASKA ALUMNAE ROBERTA HUTCHINSON MEMORIAL SCHOLARSHIP APPLICATION**  
**SCHOOL/WORK/COMMUNITY**

*(REQUIRED FORMAT – Do not create your own format)*

\*print additional forms as needed\*

**COMMUNITY SERVICE & CHURCH ACTIVITIES**

List all community and church activities

COMMUNITY SERVICE ACTIVITIES	Year(s) of Participation Check the box corresponding to each year position held			Leadership List any titles or positions of leadership held	Year(s) of Leadership In which years did you serve in a position of leadership?		
	FR	SO	JR		FR	SO	JR
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
CHURCH ACTIVITIES	Year(s) of Participation Check the box corresponding to each year position held			Leadership List any titles or positions of leadership held	Year(s) of Leadership In which years did you serve in a position of leadership?		
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>			<b>Participation in Alaska Alumnae Programs</b> <i>(if applicable)</i>			
	<input type="checkbox"/>			GEMS			
	<input type="checkbox"/>			EMBODI			
	<input type="checkbox"/>			Jabberwock			

Name \_\_\_\_\_  
 (Last) (First) (MI)

**ALASKA ALUMNAE ROBERTA HUTCHINSON MEMORIAL SCHOLARSHIP APPLICATION  
AWARDS**

*(REQUIRED FORMAT – Do not create your own format)*

\*print additional forms as needed\*

<b>AWARDS</b> List all awards received				
<b>Award</b>	<b>ORGANIZATION</b> List the organization granting the award	<b>Year(s) Award Received</b>		
		FR	SO	JR
		FR	SO	JR
		FR	SO	JR
		FR	SO	JR
		FR	SO	JR
		FR	SO	JR
		FR	SO	JR
		FR	SO	JR
		FR	SO	JR

Name  
(Last) (First) (MI)

**Post-Secondary Information:**

Institution(s) to which you plan to apply or to which you have been accepted

Post-Secondary Institution

City\_State\_Have you been accepted? Yes No Tuition Costs (include all fees)

Post-Secondary Institution

City\_State\_Have you been accepted? Yes No Tuition Costs (include all fees)

Post-Secondary Institution

City\_State\_Have you been accepted? Yes No Tuition Costs (include all fees)

Family Information:

Number of Siblings Number of Siblings in College

Number in Household Number of family member under 18 years of age **Are you the first**

**person in your immediate family to go to college?\_Yes\_No**

**Letters of Recommendation:**

Include two letters of recommendation on official letterhead from individuals who are qualified to evaluate your academic leadership accomplishments, community service involvement and personal qualities. List their names and title or position. Letters can be mailed or emailed for submission:

Name Title/Position


Name  
(Last) (First) (MI)



## STATEMENT OF RELEASE:

Alaska Alumnae Chapter of Delta Sigma Theta Sorority, Incorporated, is authorized to release information contained in this application should I become a scholarship recipient. I certify that the essay is my personal work and that the information submitted is true and accurate to the best of my knowledge.

Applicant's Signature: Date: **Materials submitted as part of the application become the property of the sorority.**

*Alaska Alumnae Chapter of Delta Sigma Theta Sorority, Incorporated may use my photograph, with or without my name, for any lawful purpose, to include publicity, illustration, advertising, and Web content. Not allowing the sorority to use your photo will have no bearing on whether or not the applicant is selected for a scholarship award.*  
**Check/circle or underline the appropriate box:**

*I agree*

*I do not agree*

## SCHOLARSHIP APPLICATION CHECK LIST

Before mailing you scholarship application, please review the checklist:

- ⑤ Is my application typed?
- ⑤ Is my application completely filled out?
- ⑤ Did I sign and date my application?
- ⑤ Did I include an official high school transcript in a sealed envelope (never been opened) with an official stamp from the school or emailed from the school mailed to the PO Box or emailed to the official DST email?
- ⑤ Did I include (1) letter of recommendation from a high school guidance counselor, teacher or principal and (1) letter of recommendation from a community service representative either mailed to the PO Box or emailed to the DST email?
- ⑤ Are my letters of recommendation on official letterhead and signed with contact info? ⑤ Did I include a typed personal statement per one of the prompt questions mailed to the PO Box or emailed as an attachment to the DST email?
- ⑤ Did I include a photo of myself mailed to the PO Box or emailed as an attachment to the DST email?

**PLEASE NOTE: LATE OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**

**EMAIL COMPLETED APPLICATION TO [DSTAlaskaAlumnae@gmail.com](mailto:DSTAlaskaAlumnae@gmail.com) or MAIL**

**COMPLETED APPLICATION PACKET TO:**

**Alaska Alumnae Chapter  
Delta Sigma Theta Sorority, Inc.  
Roberta Hutchinson Memorial Scholarship Committee  
P O Box 141885  
Anchorage, AK 99514-1885**

**PACKET MUST BE POSTMARKED NO LATER THAN APRIL 15, 2021 or emailed by**

**11:59pm APRIL 15, 2021 TO BE CONSIDERED.**