



Fredericksburg Area Alumnae Chapter
Delta Sigma Theta Sorority, Inc
P.O. Box 8386
Fredericksburg, VA 22404

CARRIE HILL TATUM MEMORIAL SCHOLARSHIP APPLICATION

PERSONAL INFORMATION

NAME: _____
(Last) (First) (Middle)

ADDRESS: _____

EMAIL ADDRESS (student's): _____

TELEPHONE NUMBER (H): _____ STUDENT'S CELL NUMBER: _____

MOTHER'S NAME: _____

MOTHER'S OCCUPATION: _____

FATHER'S NAME: _____

FATHER'S OCCUPATION: _____

FAMILY MEMBERS: # of SISTERS: _____ # of BROTHERS: _____

IS YOUR MOTHER A MEMBER OF DELTA SIGMA THETA SORORITY, INC.? ____YES ____NO ____N/A

IF YES, NAME OF THE CHAPTER: _____

EDUCATIONAL INFORMATION

HOW MANY FAMILY MEMBERS WILL BE IN COLLEGE IN FALL 2025? (Including you): _____

NAME OF HIGH SCHOOL: _____

GPA: _____ RANK IN CLASS: _____ OF _____ STUDENTS

SAT SCORES: V_____ M_____ *W_____ (*Optional)

ACT SCORE: _____

HAVE YOU BEEN ACCEPTED to any accredited four-year educational institution?

____YES**

____NO

****If yes, please include a copy of your acceptance letter(s).**

COLLEGE/UNIVERSITY _____

INTENDED MAJOR _____

CAREER GOAL _____

APPLICANT'S SIGNATURE: _____

****ELECTRONIC SIGNATURES ARE NOT ACCEPTED****

CARRIE HILL TATUM MEMORIAL SCHOLARSHIP REQUIREMENTS

ATTACH THE FOLLOWING ON SEPARATE SHEETS OF PAPER

1. **ESSAY:** Write an essay, a minimum of 1 double-spaced page.
Delta Sigma Theta Sorority, Incorporated is a sorority dedicated to service.
How has your experience in volunteering for community service activities impacted your life?
2. **EXTRA-CURRICULAR, SCHOLASTIC, AND COMMUNITY ACTIVITIES:** List any extra-curricular, scholastic, and community service activities in which you are involved. (For example: Cultural Enrichment programs, club-sponsored activities, community projects, church projects, music and/or sports interests or activities. Indicate offices held, if any).
3. **LIST ANY RECENT EXTRA-CURRICULAR AND SCHOLASTIC ACCOMPLISHMENTS:** (For example: Governor's School, writing or art contest, papers published, scholastic and athletic awards, i.e. - honor roll, athletic letter, etc.).

INCLUDE THE FOLLOWING WITH YOUR APPLICATION

4. **OFFICIAL TRANSCRIPT (GRADES and COPIES OF OFFICIAL SAT OR ACT SCORES):** Must be in a sealed envelope with the proper seal and signature of the school counselor. NO PHOTOCOPIES WILL BE ACCEPTED. Student will be disqualified without an official school transcript which has been signed and stamped by the school counselor.
5. **LETTERS OF RECOMMENDATION** - on official school letterhead- provide two letters of recommendation, one from an academic teacher and another from a school official (i.e. - a guidance counselor, a principal or an assistant principal) who can verify scholarship of student.

SUBMISSION DETAILS

The deadline to submit applications is **Monday, March 31, 2025.**

ALL components of the application **MUST** be **POSTMARKED BY: Monday March 31, 2025.**

Following application reviews, we will schedule **MANDATORY** interviews before final selections occur.

APPLICATIONS POSTMARKED AFTER MARCH 31, 2025 WILL NOT BE CONSIDERED.

Please send all application components to:

**Scholarship Committee
Fredericksburg Area Alumnae Chapter
Delta Sigma Theta Sorority, Inc.
P.O. Box 8386
Fredericksburg, VA 22404**

