



SCHOLARSHIP APPLICATION

This application is open to African American students in the Buffalo/Niagara Region

Name _____ Telephone Number _____

Address _____ City _____

Zip Code _____ Birth Date _____ Ethnicity _____

Email address _____ Gender (male/female) _____

High School _____ Graduation Date _____

Grade Point Average (Dec 2025) _____

Mother's Name _____

Address _____

Occupation _____

Father's Name _____

Address _____

Occupation _____

Brothers and Sisters*

Age

School or Occupation

1. _____

2. _____

3. _____

4. _____

5. _____

*Living in household

List special honors and awards

List all high school extra-curricular, community and leadership activities:

List hobbies and special skills:

List church affiliation and activities:

What College or University do you hope to attend (first choice)? _____

Intended Major: _____

Have you been accepted? _____ YES _____ NO

Annual College Expenditures:

Travel	_____
Tuition/Fees	_____
Clothing	_____
Room/Board	_____
Books/Supplies	_____
Other	_____

List all other scholarships for which you have applied:

1. _____

2. _____

3. _____

Have you participated in other Delta Programs? Yes ____ No ____

If yes, please provide program name and dates:

References: Two recommendation letters from individuals who have knowledge of your academic, extracurricular activities, and community service **must accompany this application.** Relatives and friends are not acceptable. Provide names of recommenders below.

Name _____ Telephone Number _____

Address _____

Name _____ Telephone Number _____

Address _____

Essays will be rated as part of the application process.

Please write a **ONE**-page essay (between 250-350 words) that include the following:

- Describe your educational and career goals. Include your motivation to pursue these goals, and the qualities you possess that will help in attaining them.
- The essay must be typed, and double spaced.
- **All applications must be typed into the fillable form then downloaded.**
- **Handwritten** applications will **NOT** be accepted.
- Scan all documents (single-sided) into **ONE PDF** and email to scholarshipdst@gmail.com by **11:59pm on March 27, 2026** (do not include double-sided pages).
- Ensure your PDF contains the application, essay, transcript, and recommendation letters.
- **Please work with your guidance counselor if you need help** with this process.
- Photographic images from your phone of the required documentation will not be accepted.

Please state below how you heard about this scholarship?

All documents **must be received by Friday, March 27, 2026.** A personal interview is a part of the application process and *applicants selected for interviews will be required to adhere to Delta Sigma Theta Sorority, Incorporated Risk Management Policies.*

PLEASE NOTE: Applicants who do not follow submission directions and whose applications omit any of the required documentation will not be considered.

All questions should be directed to Denise Hare, Scholarship Chair by email: scholarshipdst@gmail.com

Or sorority mailing address:

Delta Sigma Theta Sorority, Inc.

Buffalo Alumnae Chapter

P.O. Box 625

Buffalo, New York 14215

***Children of members of the Buffalo Alumnae Chapter of Delta Sigma Theta Sorority, Incorporated are ineligible for this scholarship.**