

**Delta Sigma Theta Sorority, Inc.**  
**Fort Knox Alumnae Chapter**  
P.O. Box 10  
Fort Knox, KY 40121

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Fort Knox Alumnae Chapter of Delta Sigma Theta Sorority, Inc. HBCU Scholarship 2023

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**Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_

**High School (name and address):**

\_\_\_\_\_

➤ **List academic and community service awards or honors received:**

<b>Year</b>	<b>Activity</b>	<b>Duties</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

➤ **List any clubs or extracurricular activities that you have been a participant (i.e.: band, chorus, sports, debate, community involvement, clubs, etc.)**

<b>Year(s)</b>	<b>Activity</b>	<b>Duties</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

➤ **Verification of grade point average by senior counselor:**

**GPA** \_\_\_\_\_ **SAT** \_\_\_\_\_ **ACT** \_\_\_\_\_ **Counselor's signature:** \_\_\_\_\_

1. **Submit two (2) letters of recommendation:** one must come from school personnel (teacher, counselor, Principal or Vice Principal). Neither person shall be related to the applicant (**Please include contact information for these individuals**).

- **Official transcripts of high school must be submitted. (SAT/ACT scores must be included)**
- **A copy of both sides of valid identification card must be attached.**
- **Essay:** Please attach a 300 to 350- word essay on the following topics:

***“What guided your decision to attend a Historically Black College/University?”***

***How will receiving this scholarship help fund your educational goals?”***

- **PRIVACY ACT OF 1943** authorized by Executive Order 9397 for collection of the following information including your Social Security Number is voluntary.

**Your Address:**

\_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Student Identification** \_\_\_\_\_

**College of choice:** \_\_\_\_\_

**Is this college recognized as a Historically Black College/University (HBCU)?** Yes/No

**Have you been accepted?** \_\_\_\_\_ **Did you attach the acceptance letter?** \_\_\_\_\_

**Intended major/ field of study:** \_\_\_\_\_ **Semester start date:** \_\_\_\_\_

**College Address:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Sign and date the following statement:**

I grant permission to use my name and photograph in publicity releases as a winner or alternate for the Delta Sigma Theta’s HBCU Scholarship without obligation or liability to me. All information released to the scholarship committee will be strictly confidential.

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

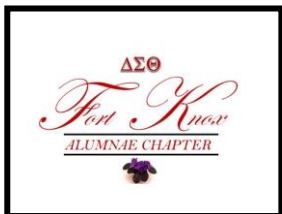
\_\_\_\_\_  
**Date**

**APPLICANT CHECKLIST:** \_\_\_\_\_ Copy of ID card

\_\_\_\_\_ Recommendations

\_\_\_\_\_ Transcripts

\_\_\_\_\_ Essay



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1. Two (2) scholarships will be awarded to ANY high school senior who will be attending a Historically Black College or University (HBCU)
2. Completed scholarship applications must be post marked/submitted no later than April 30<sup>th</sup>, 2023.
3. Application and supplemental documents required can be submitted via email to [fkac.scholarship@gmail.com](mailto:fkac.scholarship@gmail.com) or mailed to P.O. box address above.
4. A copy of both sides of a current and valid identification card must be included with application.
5. Two (2) written letters of recommendation must be submitted; one must come from school personnel (teacher, counselor, Principal or Vice Principal). Neither person shall be related to the applicant.
6. A 300 to 350-word essay as stated on the application.
7. An official high school transcript must be included with the application (SAT/ACT scores must be included).
8. A minimum cumulative grade point average of 2.5 is required.
9. Copy of the College acceptance letter must be submitted.
10. The chosen recipient of this scholarship will receive a letter from the Sorority, stating what documentation is required in order for the scholarship funds to be submitted to their enrolled College. Recipient must be enrolled as a full-time student. The scholarship check will be mailed directly to the school's financial aid office once enrollment verification has been submitted by the scholarship recipient. It is the sole responsibility of the recipient to provide proof of enrollment to the address above. Deadline to receive adequate enrollment verification is December 31, 2023 for payment