



Fayetteville Alumnae Chapter

Delta Sigma Theta Sorority, Incorporated

Former Miss Jabberwock Contestants Scholarship Application

facdstscholarship@gmail.com

Purpose

To provide financial assistance to a former Jabberwock Sweetheart participant who is currently attending a school of higher learning (i.e., community college or 4-year college).

Criteria

Students who meet the following criteria are eligible to apply for the scholarship.

1. Must be a former Jabberwock Sweetheart participant.
2. Must be enrolled as a full-time student at a community college or 4-year college/university. (Official transcript must be submitted with application).
3. Must have a minimum cumulative grade point average of 2.7.
4. Must be a current sophomore, junior or senior at a school of higher learning.

Application Process

Application must be received via email to facdstscholarship@gmail.com by 11:59 pm November 15th to be considered. No applications will be accepted after this date. The following documentation must be submitted at the time of application:

1. Application and guidelines available on the FAC website.
2. A typed essay (500 word minimum, double spaced, and Times New Roman 12-point font) indicating college major, goals, challenges if any, future as well as why you think you should receive this scholarship.
3. Two (2) letters of reference, one (1) from a member of their university and one (1) from a member of the community who is a non-relative.
4. An official college transcript with seal and registrar signature. (emailed)
5. **Completed application packet should be emailed to:**
facdstscholarship@gmail.com

Selection Process

1. Recipients will be selected by the committee based on their completed packet.
2. Incomplete applications will not be reviewed.
3. All applicants will be notified of the committee's decision by November 30, via USPS and/or email.
4. Committee decision is final.

Award

1. Each scholarship award will be in the amount of \$1,000.00.
2. The scholarship award will be made payable to the recipient's community college/university.
3. The scholarship award must be used within the academic school year received.
4. FAC-DST scholarship request form must be submitted for the scholarship to be sent to the community college/university.



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Name of Applicant_____

Phone (H)_____(Cell)_____Email_____

Home Address_____

Street

City

Zip Code

College/University_____

University Address_____

Street/P. O. Box

City

Zip Code

University/College Extra Curricula Activities, Memberships, Honors and Awards:

Public/Community Services or Involvement:

Year of Jabberwock Participation: _____

Applicant's Signature_____Date_____

(Application and guidelines may be downloaded from Fayetteville Alumnae Chapter website.)