



# Alpha Kappa Alpha Sorority, Incorporated

## SIGMA DELTA OMEGA CHAPTER

### Elk Grove, California

February 5, 2021

For 113 years, Alpha Kappa Alpha Sorority, Incorporated® has been committed to providing service to all mankind, engaging in community service, focusing on health and wellness and promoting educational excellence. The Sigma Delta Omega Chapter, of Alpha Kappa Alpha Sorority, Inc.®, is proud to continue the legacy. Currently, Sigma Delta Omega is accepting scholarship applications for this academic school year. **All applications MUST be postmarked by Saturday, May 29, 2021.** Applications postmarked after this date or applications not completed fully and/or missing documents will not be reviewed or considered.

The following is a list of qualifications required to apply for scholarships. A student must currently be:

- A senior in high school.
- Applying to attend a two-year or four-year college or university in Fall 2021.
- Minimum grade point average of 2.50.

The following six (6) documents must accompany the application:

- Official Transcript (Must be sealed with the official seal).
- Photo – Head Shot (black and white or color).
- Photo Release Form
- Two (2) letters of recommendation; *(from teacher, coach, counselor, member of the community or direct supervisor)*. The letter of recommendation should address: Character, Academics, Background, Achievements and Leadership Abilities, Community Involvement, etc. (Both letters must be signed by the authors).
- Essay – Topic: **Upon completion of your degree, how do you see yourself making a difference in society?** Essay must be typed, free of errors and contain a minimum of 300 words and a maximum of 500 words.

#### **Mail application and supporting documents to the following address:**

Sigma Delta Omega Chapter  
ATTN: 2021 Scholarship Committee  
P.O. Box 581375  
Elk Grove, CA 95758

*Gwendolyn Davis*  
Gwendolyn Davis, Scholarship Chairman

*Brittnee Gillespie Malone*  
Brittnee Gillespie-Malone, President

**P.O. Box 581375, Elk Grove, CA 95758**  
**www.AKASDO.org**

# 2021 SCHOLARSHIP APPLICATION

Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip Code

Contact Number: Home: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name of High School: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_

Current GPA: \_\_\_\_\_

SAT Score: \_\_\_\_\_

ACT Score : \_\_\_\_\_

Extra- Curricular Activities:

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Community Service Activities:

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Colleges Applied to or Being Considered:

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Anticipated Major:

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# Photo Release Form

Permission to Use Photograph

Subject: 2021 Scholarship

I grant to Sigma Delta Omega Chapter of Alpha Kappa Alpha Sorority, Inc.<sup>®</sup>, and its representatives the right to take photographs of me and my property in connection with the above-identified subject. I authorize Sigma Delta Omega Chapter of Alpha Kappa Alpha Sorority, Inc.<sup>®</sup>, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that Sigma Delta Omega Chapter of Alpha Kappa Alpha Sorority, Inc.<sup>®</sup> may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Signature \_\_\_\_\_

Printed name \_\_\_\_\_

Date \_\_\_\_\_

Signature, parent or guardian \_\_\_\_\_

(If under age 18)