

Columbus Metropolitan Alumnae Chapter Delta Sigma Theta Sorority, Inc. Janie L. Williams Memorial Scholarship

SCHOLARSHIP GUIDELINES

Eligible applicants for the Janie L. Williams Memorial Scholarship must meet the following scholarship criteria:

- Be enrolled in a high school in the Columbus Metropolitan area;
- Show a commitment to scholastic achievement by possessing a minimum of a 3.0 (B) cumulative grade point average on a four-point scale;
- Must have completed or be eligible to complete all high school graduation requirements by the end of the 2022-2023 academic year;
- Exhibit a commitment to community and/or volunteer service;
- Must complete a Scholarship Application by **April 22, 2023**;
- Must provide two letters of recommendation, one from a school official (instructor, counselor, coach or principal) and one from an individual in the community (must not be a relative);
- Must enroll in an accredited college and provide a letter of acceptance for the 2023-2024 academic year.

Application Checklist:

Before submitting your application packet, please ensure that you have included the following items:

- ___ Scholarship Application (typed or printed legibly)
- ___ Official High School Transcript verifying grade point average and class ranking
- ___ Letters of Recommendation (2 sign copies)
- ___ The recommender must email the letters to scholarship.cmacga@gmail.com
- ___ Verification of College Acceptance

Completed Packets must be emailed to scholarship.cmacga@gmail.com or mailed to:

Delta Sigma Theta Sorority, Inc.
Attention: Scholarship Committee Chair
Columbus Metropolitan Alumnae Chapter
P.O. Box 6631
Columbus, GA 31917

Application Deadline: Completed applications must be postmarked by April 22, 2023 or emailed scholarship.cmacga@gmail.com by 6:00 p.m. eastern time.

All scholarship recipients will be notified regarding the scholarship awards via email.

**Columbus Metropolitan Alumnae Chapter
Delta Sigma Theta Sorority, Inc.
Janie L. Williams Memorial Scholarship
Application Form**

Name _____ Date of Birth _____

Parent/Guardian _____

Address _____

City _____ State _____ Zip Code _____

Email Address _____ Cell Phone Number _____

Current High School _____

Address of High School _____

Cumulative Weighted GPA _____ Cumulative Unweighted GPA _____

Rank in Senior Class _____

Community/Civic Involvement (High School Only):

Extracurricular Activities (High School Only):

High School Honors:

List the college(s) where you have been accepted and/or plan to attend for fall semester 2023:

Please state your educational goals for the next five (5) years. In your short essay, include how this scholarship will assist you in accomplishing this goal. Please attach an additional sheet.

Signature _____ Date _____