



Delta Sigma Theta Sorority, Inc.
Montgomery (AL) Alumnae Chapter
Signature Programs (Delta Academy, Delta GEMS,
EMBODI)
2020 – 2021 Application

What is the mission and goal of the Signature Programs?

The mission of the Signature Programs is to provide an environment and opportunities for each at-risk participant to excel academically, personally, morally, and socially, while transforming them into self-sufficient and independent citizens. Program activities include but are not limited to Parent/Participant Orientation; assessment in math, science, and writing; computer training; study techniques, seminars, cultural events, and community service projects. The goal of the Delta Academy, Delta GEMS, and EMBODI programs is to produce empowered, informed, and productive future leaders.

What are the qualifications to participate in the Signature Programs?

- ✓ Delta Academy participants shall be 11 years old (10 if they turn 11 by September 2, 2020).
- ✓ Delta GEMS participants shall be 14 years old (grades 9-12). Seniors who have never participated in the Signature Programs are not eligible.
- ✓ EMBODI participants shall be at least 10 years old (9 if they turn 10 by September 2, 2020). Seniors who have never participated in the Signature Programs are not eligible.

Participation by Relatives of Members of Delta Sigma Theta Sorority, Inc.

- ✓ Members of Delta Sigma Theta Sorority, Inc. must notify the Committee Chair of their membership. This information should also be included on the application in the appropriate section.
- ✓ No more than 20% of total participants in the Signature Programs will be comprised of relatives of sorority members. **THIS WILL BE STRICTLY ENFORCED.**
- ✓ A Relative is defined as child, grandchild, niece, nephew, cousin, and/or sibling.

APPLICATIONS MUST BE POSTMARKED BY July 24, 2020

Delta Sigma Theta Sorority, Inc.
Montgomery (AL) Alumnae Chapter
P.O. Box 5144
Montgomery, AL 36103
Attention: Signature Programs

Please complete entire packet and provide all requested information. Incomplete applications will not be considered.

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PLEASE TYPE OR PRINT LEGIBLY.

PERSONAL INFORMATION

Circle program being applied for: **Delta Academy** **Delta GEMS** **EMBODI**

Last Name: _____ First Name: _____ Date of Birth: _____

Mailing Address: _____ City: _____ Zip Code: _____

Preferred E-mail Address: _____

Home Phone: _____ Cell Phone: _____ Current Age: _____

Shirt Size: T-shirt/Polo Shirt (circle one) XS, S, M, L, XL, XXL, XXXL

Button-down Shirt (circle one) S, M, L, XL, XXL, XXXL

Youth or Adult Sizes? Youth Adult

SCHOOL INFORMATION

Name of School in 2020 -2021 _____

Grade Level in 2020 -2021 _____

Strongest Academic Subject: _____ Weakest Academic Subject: _____

List the extra-curricular school activities in which you participated during the 2018- 2019 school year:

Applicants must submit the completed packet along with the following:

- Completed recommendation forms (attached) from teachers, counselors, pastors or any non-family member.
- **All applicants:** A description of the community service you have performed. If you have not performed community service, describe the type(s) of community service you would like to perform.
- **New applicants only:** Essay, no more than 250 words, answering the following: Why do you want to participate in Signature Programs?
- **Returning applicants only:** Essay, no more than 250 words, answering the following: What have I gained from participating in Signature Programs and what would I like to experience in the future?

• PARENT/GUARDIAN INFORMATION

Mother Name: _____ Father Name: _____

Guardian Name: _____

Home Phone Number: _____ Best time to call (__ Morning, __ Afternoon, __ Evening)

Mother Work Number: _____ Cell Phone Number: _____

Father Work Number: _____ Cell Phone Number: _____

Guardian Work Number: _____ Cell Phone Number: _____

Personal E-mail Address to Receive Parent/Guardian Communication: _____

I affirm that all statements made in this packet are true, and I understand the requirements of the Signature Programs.
(The electronic signature indicates that you acknowledge that you are submitting an application for your child to participate in a youth initiative of the Montgomery (AL) Alumnae Chapter of Delta Sigma Theta Sorority, Inc.)

Signed _____
(Applicant Signature)

Date: _____

Signed _____
(Parent Signature)

Date: _____

Is anyone in your family a member of Delta Sigma Theta Sorority, Inc.? Circle one.

YES

NO

If so, please list name(s) and relationship to applicant:

REFERENCE FORM 1

Applicant Name: _____

Name of Reference: _____

Contact Number: _____

School: _____

Please indicate your position in the school:

Teacher (Subject) _____

Counselor

Administrator

How long have you known the applicant? _____

In what capacity do you know the applicant? _____

Why are you recommending the applicant for Signature Programs?

REFERENCE FORM 2

Applicant Name: _____

Name of Reference: _____

Contact Number: _____

School: _____

Please indicate your position in the school:

Teacher (Subject) _____

Counselor

Administrator

How long have you known the applicant? _____

In what capacity do you know the applicant? _____

Why are you recommending the applicant for Signature Programs?

PLEASE RETAIN FOR FUTURE REFERENCE

Program Requirements

1. Each participant is required to have program attire. Program attire consists of a short sleeve, polo-style shirt and/or a long sleeve program shirt.
2. Each participant is required to have a 1-inch binder to maintain program information and assignments. Black, red or white binders are preferred. Binder should be brought to each activity unless otherwise specified.
3. Each participant will be expected to submit copies of **report cards** during the following months of the program year: **October, January, and March**. If the average grades are below a grade level C, progress reports will be required as well.
4. Parents or guardians are REQUIRED to attend at least two (2) parental workshops during the program year. This requirement must be fulfilled for the participant to reapply to either program in subsequent years.
5. Participation and attendance is required. Participants are not allowed more than two (2) excused absences per program year. Prior notification should be given to the appropriate program chair.
6. The committee will monitor social networking sites such as Facebook, Snap Chat, Twitter, Instagram, etc. Each participant should provide his/her identity information for each of his/her sites.

Portfolio Requirements

1. This assignment is a **requirement**, not an **option**.
2. The portfolio should be the medium used to chronicle all events of the program year.
3. Please include photos of your experiences, especially community activities.
4. It is the participant's choice as to how her portfolio is presented. It may be in the form of a scrapbook, PowerPoint presentation or notebook. All PowerPoint presentations must be submitted in the one of the following forms: CD, DVD or flash drive.
5. Each portfolio will be evaluated using the following criteria:
 - a. Content
 - b. Accuracy
 - c. Creativity
 - d. Thoroughness
 - e. Clarity
6. Portfolios are due at the end of the April 2021 monthly activity. Time will be given during the April activity to put final touches to portfolio.
7. Please **DO NOT** use any Delta Sigma Theta Sorority, Inc. logo, symbols, letters, etc. in the portfolio. The Signature Programs has a logo that will be emailed to you for placement in your portfolio.
8. **ALL PARTICIPANTS ARE REQUIRED TO SUBMIT AN ACCEPTABLE PORTFOLIO (75% OR ABOVE). ANY PARTICIPANT FAILING TO FULFILL THIS REQUIREMENT WILL FORFEIT HER OPPORTUNITY TO PARTICIPATE IN SUBSEQUENT PROGRAM YEARS AND WILL FORFEIT ANY BENEFITS OF THE PROGRAM.**

Recognition will be given during the culminating activity to all participants successfully completing this requirement.

PACKET CHECKLIST

This form is for your personal use and should **not** be returned with your information packet.

Place a check mark next to the items below to ensure all items are included in your information packet:

- Personal Information form (signed and dated)
- Parent/Guardian Information Form (signed and dated)
- 2 completed recommendation forms
- Essay
- Community Service description

PLEASE REMEMBER...

1. Failure to submit **all parts** of the information packet will exclude you from consideration.
2. Incomplete applications will make the applicant ineligible for participation.
3. If you have questions, please email them to macsignatureprograms@gmail.com.
4. **Please be sure to provide a valid personal email address**, as communication will be done via email Work email addresses (those that end in .edu, .gov, .state.al.us, etc.) should **not** be provided.

No Hand Deliveries

Applications must be postmarked by July 24, 2020

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