DES MOINES ALUMNAE CHAPTER DELTA SIGMA THETA SORORITY, INC.

HELEN LEMME SCHOLARSHIP APPLICATION

ATTENTION: AFRICAN AMERICAN STUDENTS!

If you are a high school graduating senior and live in the toll-free calling area of Des Moines and Boone, Iowa, you are eligible to apply for this scholarship. To be considered, you **MUST** do all of the following:

- 1. Have a minimum cumulative GPA of 2.5
- 2. Submit an application online or print the application and submit a typed application via the U.S. postal service
- 3. Submit two (2) letters of reference from individuals who are not relatives. At least one letter of reference must be from a current or former teacher. Letters should include specifics on the student's academic performance, how they adapt socially and their overall attitude about school and their future.
- 4. Submit an **OFFICIAL** copy of your high school transcript from the registrar. Copies **WILL NOT** be accepted if they state "Issued to the student." The transcript should identify your African American or Black heritage.
- 5. Submit a typed one page essay discussing your future plans and why you feel you deserve the Helen Lemme Scholarship. The essay should be 1 page. Essays should be typed using Times New Roman, 12-point font, and double spaced.
- 6. Submit a recent photograph along with the consent to publish
- 7. Participate in a ZOOM interview

If you submit your application via mail, you can mail your essay, transcript, and letters of reference to the address listed below. You will receive a confirmation email once all parts of your application are received.

Des Moines Alumnae Chapter Scholarship Committee Attn: Maria J. Barnes P.O. Box 4706 Des Moines, IA 50305

The application packet must be submitted online or postmarked on or before April 23, 2023

For additional information, contact Maria J. Barnes at dsmdstscholarships@gmail.com

HELEN LEMME SCHOLARSHIP APPLICATION

• (High school **SENIORS** only)

Name	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·					_
Address				ip			_
Telephone ()		Email					-
Parent/Guardian	Informati	<u>on</u>					
Parent			Parent				
Address (If different than address above)			Address (If different than address above)				
City, State, Zip			City, State, Zip				
Occupation			Occupation				
*Total annual household income (including SSI, Military benefits, FiP, Retirement, Pension, Child Support):			*Total annual household income (including SSI, Military benefits, FIP, Retirement, Pension, Child Support):				
Number of other depend	ents in the ho	me: children	_ adults				
Number of other family n	nembers in the	e home that attend	college _				
Relationship to applican	t						
Education History	List schools atter	nded)					
School	Grade Point Average	Location		Dates Attended	ACT Score	SAT Score	

Information in this application is confidential and shared only with members of the Scholarship Committee.

^{*} Income must be included for application to be considered

HELEN LEMME SCHOLARSHIP APPLICATION

School and Commur (Please list and describe			al sheet if nece	essary)		
College Plans	har advantian/t	rainin a)				
Indicate choice of higl □ Vocati	ional/Trade Sc					
	nunity College rsity or College	(four year)				
		,				
Name of institution(s						
(List no more than three ((3) in priority ord	,	an X to identif	y if you ha	,	-
Name	Tuition Cost	Room & Board Cost	Miscella Exper		Accepted by the School	Have Not Been Informed of Acceptance
1.						•
2.						
3.						
Financial Assistance	•					
Family financial assis Did you complete a Fa □ Yes □ No		Assistance F	Form? (.i.e. F	AFSA for	m):	
How much are you exp How much are your pa		•	•	ses?	\$ \$	· · · · · · · · · · · · · · · · · · ·
					· 	
Other Scholarships an	d Grants: (List	all those for w	hich you have	applied. l	Jse an additiona	I sheet if necessary.)
Scholarship/Gra (List lowa tuition & gra Pell, or other Schola	ants. i.e. R	equested Amount	Amount Awarded	(.i.e., t	does it cover? tuition, room & ard, other)	Have you been notified that amount was awarded?

HELEN LEMME SCHOLARSHIP APPLICATION

Employment Opportunities: Do you plan to seek employment to hel _l	p finance your education? Please expl	ain.
References		
Please list names and addresses of elated).	f two (2) references. One must be a	a current or former teacher (not
Name	Address	Relationship to Applicant
		Арриоанс
I certify that the information	provided in this application is	true, complete, and accurate
I certify that I am a graduati	ing senior	
I certify that I am African-A	merican	
I certify that all statements a	nd essays submitted are my owi	n work
I consent to having my photo	ograph published on Des Moine	es Alumnae's website
		Applicant's Signatur
		Do

Thank you for your interest in Delta Sigma Theta Sorority's Helen Lemme Scholarship. Page $4\ {
m of}\ 5$

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Application Check-List

Mailing Address::	Des Moines Alumnae Chapter Scholarship Committee Attn: Maria J. Barnes P.O. Box 4706
	at dsmdstscholarships@gmail.com if you have not received a) week after submitting your complete application.
Completed applications of Incomplete applications of the Incom	must be submitted online or postmarked by Apirl 23, 2023. vill not be reviewed.
Consent to have p	hotograph published on Des Moines Alumnae's website
Current photograp	h
Official High School	ol Transcript
Examples – Emplo	yer, mentor, pastor, family friend
(1) Reference Lette	er (Sent directly to address below)
、 ,	er (Sent directly to address below) rent or past teacher
double spaced	
Helen Lemme Scholarshi	p. Essays should be typed using Times New Roman, 12-point font and
if printed and maile Essay. The essay s	ed. should be 1 page explaining your future plans and why you deserve the
Completed, signed	, and dated application. The application must be typed
Current high schoo	I senior

Des Moines, IA 50305