



*CATHERINE B. MIDDLETON SCHOLARSHIP  
for High School Students*



*Sponsored by the  
Dover Alumnae Chapter of Delta Sigma Theta Sorority, Inc.*

**NAME AND PURPOSE**

Each year the Dover Alumnae Chapter of Delta Sigma theta Sorority, Inc., awards several scholarships named in honor of *Catherine B. Middleton, M.D.*, daughter of one of the Sorority's Founders, *Jimmie Bugg Middleton*. The purpose of the scholarship is to assist outstanding students in pursuing an undergraduate degree at an accredited four-year college or university. The scholarships are based on academic achievement, aptitude, leadership, character, and financial need.

**QUALIFICATIONS•**

To qualify for consideration, the applicant must:

1. Be a resident of Kent County, Delaware.
2. Be accepted as a full-time student at an accredited four-year college or university.
3. Submit a letter explaining your goals and why you should be considered for this scholarship.
4. Complete the application and financial need form.
5. Submit an official transcript which includes class rank, grade point average (*GPA*) and SAT and/or ACT scores.
6. Submit three (3) letters of reference from people who can attest to your academic abilities and character. One letter **MUST** be from a member of Delta Sigma Theta Sorority, Inc.

All scholarship application materials must be postmarked by APRIL 1<sup>ST</sup> and received on or before APRIL 5<sup>TH</sup> to be considered.

**Mail applications to:**

Scholarship Chairperson  
Delta Sigma Theta Sorority, Inc.  
P. O. Box 636  
Dover, DE 19903

High School Students Application & Financial Need Form

PERSONAL DATA:

Applicant's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ Sex \_\_\_\_\_ Ethnic Background \_\_\_\_\_  
Father's Name \_\_\_\_\_ M o t h e r ' s Name \_\_\_\_\_  
Father's Occupation \_\_\_\_\_  
Mother's Occupation \_\_\_\_\_  
With whom do you reside? \_\_\_ Both parents \_\_\_ Mother only \_\_\_ Father Only \_\_\_ Other (Specify) \_\_\_\_\_  
Number of children at home \_\_\_\_ (**including applicant**) Number of siblings/household members presently in college full-time \_\_\_\_\_  
High School Attended \_\_\_\_\_, \_\_\_\_\_ Year of Graduation \_\_\_\_\_

**Note: You may submit a resume' in lieu of completing this section.**

List any offices held and honors received in High School \_\_\_\_\_

List the activities engaged in while in High School (**clubs, sports, community, church, etc.**)

Complete the following information for each of the 4-year accredited colleges to which you have applied.

College	Address	Application Status	Tuition	Room& Board	Books& Materials	Personal Expenses	Travel	Total

Proposed Major .....

Financial Statement - *Applicant's Estimated Receipts*

Parent Contribution	Applicant's Expected Summer Earnings	Applicant's Savings	Gifts or other income	Scholarships			Loans/ Aid	Total
				Name	Amount	Status*		
								\$

*\*Status of scholarship - Put an "A" if scholarship has been awarded, put a "P" if scholarship is pending - use additional sheet if necessary*

Additional information that you would like us to consider:

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I hereby certify that the above information is true and complete to the best of my knowledge:

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

Student Signature .....

Date .....