



**Delta Sigma Theta Sorority, Inc.
St. Louis Alumnae Chapter
2015-2016 Year**

Delta G.E.M.S. (*Growing and Empowering Myself Successfully*)

RETURNING GEMS APPLICATION

A natural outgrowth and expansion for the continuation of the highly successful “Dr. Betty Shabaaz Delta Academy: Catching the Dreams of Tomorrow,” Delta GEMS was created to “catch the dreams” of African American high school aged girls (Freshman – Senior). Delta GEMS provides the frame work to actualize those dreams through performance of specific tasks that develop a “CAN DO” attitude. The goals of Delta GEMS are:

- Δ To instill the need to excel academically;
- Δ To provide tools that enable girls to sharpen and enhance their skills to achieve high levels of academic success;
- Δ To assist girls in proper goal setting and planning for their futures --- high school and beyond; and
- Δ To create compassionate, caring, and community minded young women by actively involving them in service learning and community service opportunities.

The Delta GEMS framework is composed of five major components (Scholarship, Sisterhood, Show Me the Money, Service, and Infinitely Complete), forming a road map for college and career planning. Topics within the five major components are designed to provide interactive lessons and activities that provide opportunities for self-reflection and individual growth.

All participants must meet the following criteria:

- Δ A high school student ¹
- Δ Completed profile sheet
- Δ Submit an essay about why she wants to be a member of the Delta GEMS
- Δ Consistent attendance to monthly meetings and scheduled service projects
- Δ A POSITIVE ATTITUDE!

¹ All applicants that are currently in high school must provide their report cards for the previous January--May 2015 semester.

****The standard meeting date and time for the Delta GEMS is the second and fourth Saturdays of every month from 1:00 – 3:00 pm unless otherwise determined.****

Please complete all sections of the attached profile sheet and provide all required attachments and e-mail them to dstslagems@gmail.com.

The application must be received ELECTRONICALLY by Wednesday, September 30, 2015.

NO applications will be accepted after this date!



Delta GEMS Profile Sheet

(Please Type or Print Legibly)

PERSONAL INFORMATION

Applicant Name (Last, First, MI)		DOB/Age	
Applicant Address	City	State	Zip
Home Phone Number/Cell Phone Number		E-mail Address	
Parent(s)/Legal Guardian Name (s)		Parent(s) Email Address	

HIGH SCHOOL INFORMATION

School Name	Current Grade
School Address	

COMMUNITY SERVICE & SCHOOL INVOLVEMENT

Community Service Organization & Role	School Activity & Role

HONORS & AWARDS

Are you a Delta Academy graduate? Yes or No (please check one)

Is there anything that you would like to share that you believe would aid the committee in the decision making process?



Delta GEMS Application Checklist

(Please Type or Print Legibly)

In order to submit a complete application packet, you will need the following items:

ALL APPLICANTS

- Completed application including signature of applicant and parent(s) or legal guardian.
- Resume (include community service, jobs, positions held in school and/or church, etc.)
- Official School Issued Report card
- Health Forms
- Parental Forms

Participant's Signature (Type Electronic Signature) Date _____

Parent(s)/Legal Guardian's Signature (Type Electronic Signature) Date _____

E-MAIL PROFILE SHEET & ATTACHMENTS TO: dstslagems@gmail.com
