



2022 – 2023 DELTA GEMS PROGRAM
Fairfax County Alumnae Chapter
Delta Sigma Theta Sorority, Incorporated Application
Check List

Remember to include ALL portions of the participant application package. This includes:

- Delta GEMS Profile Sheet
- Applicant Essay Response **(NEW APPLICANTS ONLY)**
- Recommendation from School, Church, or Community Official **(NEW APPLICANTS ONLY)**
- Parent/Guardian Consent and Emergency Information Form
- A Copy of Your Most Recent Report Card

Please complete all portions of the participant application and mail or email them to the address below. The application **must be postmarked by October 5, 2022**. Scanned PDF versions **with the appropriate signatures** must be received **no later than 8 PM on the same date**. Please send all questions to Delta GEMS Coordinator, Nikita Carter at 571-348-4528, or email GEMS@fcacdst.org.

MAIL APPLICATION PACKAGE TO:

Fairfax County Alumnae Chapter
Delta Sigma Theta Sorority, Inc.
Attn: Delta GEMS
P.O. Box 221224
Chantilly, VA 20153-1224

OR EMAIL TO:

Gems@fcacdst.org

All that are interested in participating in the 2022 - 2023 Delta GEMS Program will be **required** to attend an information session **with their parents/guardians**.

This session will be held **October 30, 2022 from 2:00–3:30 pm via Zoom**.

Fairfax County Alumnae Chapter Delta Sigma Theta Sorority, Inc.
P.O. Box 221224 Chantilly, VA 20153-1224

Gems@fcacdst.org



FAIRFAX COUNTY ALUMNAE DELTA SIGMA THETA SORORITY, INC. DELTA GEMS: GROWING AND EMPOWERING MYSELF SUCCESSFULLY

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 minority high school aged girls, grades 9 - 12. 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:

- To instill the need to excel academically;
- To provide tools that enable girls to sharpen and enhance their skills to achieve high levels of academic success;
- To assist girls in proper goal setting and planning for their futures – high school and beyond; and
- 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:

- Be a high school student (9 – 12th grade) living in Fairfax County
- Currently have a minimum GPA of 2.5 (4.0 scale)
- Have the ability to commit to consistently attend a majority of meetings, programs and scheduled service projects. Additionally, all participants must have a POSITIVE ATTITUDE!
- Complete and submit all forms in the participant application package by the submission deadline, applications received after the deadline will not be considered

A calendar of the Delta GEMS Programs will be provided to all young ladies who meet the eligibility criteria and are accepted into the program. The GEMS sessions will be comprised of fun and interactive educational and community service activities. The Fairfax County Alumnae Chapter's Delta GEMS Program will run from October 2022 – May 2023. **The information meeting will be held Saturday, October 30, 2022** - beginning with an hour-long parent/guardian and GEMS meeting to explain expectations for the coming year and to conduct **mandatory risk management training**.

The participant application package includes:

- Applicant Profile Sheet(attached)
- Essay (question provided at the end of the profile sheet)
- Recommendation from school, church or community official
- Parental Consent Form
- A copy of your most recent report card showing your current GPA

Please complete all portions of the participant application and mail them to the address below. The application must be postmarked by, **October 5, 2022** or the scanned PDF version **with appropriate signatures** must be received no later than 8 PM on the same date. Please send all questions to Gems@fcacdst.org.

MAIL APPLICATION PACKAGE TO:

Fairfax County Alumnae Chapter
Delta Sigma Theta Sorority, Inc.
Attn: Delta GEMS
P.O. Box 221224
Chantilly, VA 20153-1224

OR EMAIL TO:

Gems@fcacdst.org

ABOUT DELTA SIGMA THETA SORORITY, INCORPORATED

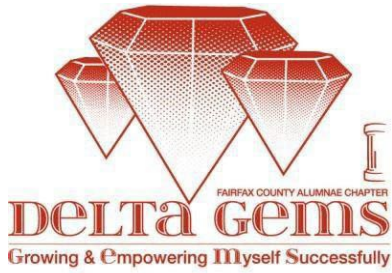
The Delta Sigma Theta Sorority, Incorporated is a private, non-profit organization whose purpose is to provide services and programs to promote human welfare. A sisterhood of more than 200,000 college educated women, the Sorority currently has over 900 chapters located in the United States, England, Japan, Germany, the Virgin Islands, Bermuda, the Bahamas, and the Republic of Korea.

The Sorority was founded in 1913 by 22 students at Howard University. These young women used their collective strength to promote academic excellence and provide assistance to the needy. The major programs of the Sorority are based upon the organization's Five Point Thrust:

- Economic Development
- Educational Development
- International Awareness and Involvement
- Physical and Mental Health
- Political Awareness and Involvement

Fairfax County Alumnae Chapter Delta Sigma Theta Sorority, Inc
P.O. Box 221224 Chantilly, VA 20153-1224
Gems@fcacdst.org





DELTA GEMS PROFILE SHEET

Complete **ALL** fields. Please Type or Print Legibly.

Personal Information

Applicant Name (Last, First, MI):	
Date of Birth:	
Age:	
Address:	
Phone:	
Email Address:	
Parent/Legal Guardian(s):	
Parent/Legal Guardian Email Address:	
Referred by:	

High School Information

School Name:	
School Address:	
Grade:	
Current GPA:	

Community Service and School Involvement

Community Service Organization & Role	School Activity & Role

Honors and Awards

Essay

(Required for new applicants ONLY)

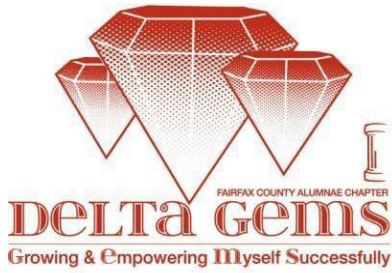
On a separate sheet of paper, please provide a typed essay of 250 words or less responding to the prompt below:

How have you demonstrated leadership, both in the community or school and in your personal life?

Applicant Signature

Applicant's Signature: _____ Date: _____

Parent/Legal Guardian Signature: _____ Date: _____



DELTA GEMS

School, Church, or Community Official Recommendation Form (Required for new applicants ONLY)

I, _____, request that you complete this recommendation form, a requirement form my application for the 2022-2023 Fairfax County Alumnae Chapter of Delta Sigma Theta Sorority, Inc. Delta GEMS Program. I understand that by signing this form, I waive my right to access this information. However, I am not required to sign this waiver in order to be considered for the Delta GEMS Program

Applicant Signature: _____

Date: _____

The above student has applied to participate in the Fairfax County Alumnae Chapter of Delta Sigma Theta Sorority, Inc. 2022-2023 Delta GEMS Program. The Selection Committee is seeking an honest appraisal of the applicant's qualifications and character. The student's demonstrated academic advice, scholarship, leadership, character, and other pertinent facts are welcomed support. This account is confidential and will not be seen by the applicant. Please provide your description in the space provided below. Attach an additional sheet if necessary. Enclose the completed recommendation in a sealed envelope, sign across the seal, and return to the applicant for inclusion in their application packet no later than **October 5, 2022**. If you have any questions, please email GEMS@fcacdst.org.

DELTA GEMS

Parent/Guardian Consent and Emergency Information Form

I, _____, give consent for _____ to participate in all activities organized by or through Fairfax County Alumnae Chapter of Delta Sigma Theta Sorority, Inc. (FCAC DST) 2022-2023 Delta GEMS Program. I grant permission to make photographic records, including but not limited to the FCAC DST website, newsletter, and flyers for promotional purposes without recourse or compensation. This is also my permission for the leader in charge or designates to arrange for qualified medical attention for my child/ward in the event of an emergency without necessity of my approval. I understand that I will be notified by the quickest means possible if this authority is exercised.

Home Phone: _____

Work/Cell Phone: _____

Alternate Phone: _____

I authorize _____ to be contacted in the case of an emergency or if I cannot be reached. His/Her contact number is listed below:

Home Phone: _____

Work/Cell Phone: _____

Does your child have a medical condition that the school should be aware of before allowing your child to participate in the Delta GEMS Program? Yes _____ No _____

If yes, please state the nature of the medical conditions:

I also understand that in order for the FCAC DST Delta GEMS to maintain safe and healthy environment for all children, drugs, alcohol, violence, abusive language, and misconduct will not be tolerated at any activity. Therefore, I understand that it will be my responsibility to pick up my child immediately if my child needs to be sent home for any disciplinary reasons.

I, the undersigned, having read, understood, and completed the fields above, and having been brief regarding the nature of the Program, hereby give my permission for my child to attend and participate in the 2022-2023 Delta GEMS Program.

Signature: _____ Date: _____

Delta GEMS
Preference Worksheet

Please check the workshops / activities you would be interested in attending and/participating in.

- Book Club
- College Life
- Etiquette
- Health and Beauty
- Math and Science Exploration
- Money/Saving
- Nutrition & Exercise
- Public Speaking
- Self Esteem
- Study Habits & Homework Tips
- Technology
- Time Management/Organizing
- Tutoring
- Volunteering

Which school subjects do you need help with most?

What type of workshop sessions or classes, do you think would be helpful to you?

Adult
T-Shirt Size