



Kansas City (KS) Alumnae Chapter

Application Number: _____
(Sorority Use Only)

2024 Red Hat/Red Tie up to \$1,000.00 Scholarship Award

2024 Red Hat/Red Tie Scholarship Application Guidelines

1. Applicant must be a male or female high school senior as of August 2024, with a grade point average of 3.0 or better and of African American descent.
2. All letters of recommendation must be submitted on official letterhead. The Community Service and Scholastic Recommendations **must be typewritten and placed in a sealed envelope**, addressed to:

Delta Sigma Theta Sorority, Inc.,
Kansas City, (KS) Alumnae Chapter
Attn: Red Hat/Red Tie Committee
P.O. Box 12663 Kansas City, Kansas 66112-0663

3. The essay of the applicant must include the following:

- * Extra-curricular activities (Including dates served and leadership position held)
- * Honors and Awards (Including a brief description of the honor/award)
- * Educational Plans
- * Community Involvement (Including dates served and positions held)

4. Applicants are **required** to answer the essay question. **Response must be typed, double-spaced and a minimum of 150 words.**

5. The scholarship recipient must attend the Red Hat/Red Tie Scholarship Luncheon on Saturday, April 26, 2025. Scholarship recipients will be notified by Sunday, February 23, 2025, of location of event and time.
Completed applications and essays must be received by Thursday, January 30, 2025.

Delta Sigma Theta Sorority, Incorporated
Kansas City (KS) Alumnae Chapter
2024 Red Hat/Red Tie Scholarship
Application

Name

(First) (Middle) (Last)

Street Address

City _____ State _____ Zip Code _____

Email Address _____

Telephone Number _____ Date of Birth _____

Parent/Guardian Name(s)

Street Address

City _____ State _____ Zip Code _____

Email Address _____

Parent/Guardian Phone Number

Hm. _____ Cell _____

EDUCATIONAL BACKGROUND

High School

School Address

City _____ State _____ Zip Code _____

School Phone Number

Cumulative Grade Point Average _____

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ESSAY QUESTION

Response should be typed, double spaced and minimum of 150 words.

What does Diversity, Equity, Inclusion, and Accessibility mean to you and how have you demonstrated their use through positive impacts in your local community?

Essay must include the following:

1. EXTRA-CURRICULAR ACTIVITIES (Including dates served and leadership positions held)
2. HONORS AND AWARDS (Including a brief description of the honor/award)
3. EDUCATIONAL PLANS
4. COMMUNITY INVOLVEMENT (Including dates served and positions held)

Applicant Signature

Date

Parent/Guardian Signature

Date

Please submit the completed application to the following address:

Delta Sigma Theta Sorority, Inc.,
Kansas City (KS) Alumnae Chapter
Attn.: Red Hat/Red Tie Scholarship Committee
P.O. Box 12663
Kansas City, Kansas 66112-0063

***Postmarked no later than Thursday, January 30, 2025**

****Incomplete applications WILL NOT be considered****

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**Community Service Letter of Recommendation
Delta Sigma Theta Sorority, Incorporated
Kansas City (KS) Alumnae Chapter
2024 Red Hat/Red Tie Scholarship
Application**

Name of Applicant (Please Print) _____

This letter of recommendation must be received from someone who can confirm your community service activities; preferably, someone you have worked with in providing the community service. Persons providing the reference must not be related to the applicant.

Applicant: Give a copy of this form to the person providing the letter of recommendation. This form must be completed, signed and included in your application packet submission **NO LATER THAN Thursday, January 30, 2025.**

MUST be completed by the applicant

I give permission to release confidential information to Delta Sigma Theta Sorority, Inc., Kansas City (KS) Alumnae Chapter, as a part of the scholarship application process.

X _____
Applicant Signature

To be completed by the person writing the letter of recommendation

The above named individual (applicant), is applying for the 20 Delta Sigma Theta Sorority Inc., Kansas City (KS) Alumnae Chapter Red Hat/Red Tie Scholarship Award. Please attach to this form, a letter of recommendation on official company letterhead.

In your letter of recommendation, please include specific skills and attributes that demonstrate the applicant's leadership ability, community service involvement and how long you have known the applicant.

Should you have any questions, Tausha Hammett, the Kansas City (KS) Alumnae Chapter Scholarship Committee Chairperson, can be reached at: **redhat@dstkcks.org**

X _____
Signature of person providing recommendation

Application Number: _____
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Scholastic Letter of Recommendation

Delta Sigma Theta Sorority, Incorporated Kansas City (KS) Alumnae Chapter 2024 Red Hat/Red Tie Scholarship Application

Name of Applicant (Please Print) _____

This letter of recommendation must be completed from a faculty/staff member who can attest to your academic achievement(s) and leadership abilities.

Applicant: Give a copy of this form to the person providing the letter of recommendation. This form must be completed, signed and included in your application packet submission **NO LATER THAN Thursday, January 30, 2025.**

MUST be completed by the applicant

I give permission to release confidential information to Delta Sigma Theta Sorority, Inc., Kansas City Kansas Alumnae Chapter, as a part of the scholarship application process.

X _____

Applicant Signature

To be completed by the person writing the letter of recommendation

The above named individual (applicant), is applying for the 2024 Delta Sigma Theta Sorority Inc., Kansas City (KS) Alumnae Chapter Red Hat/Red Tie Scholarship Award. Please attach to this form, a letter of recommendation on official company letterhead.

In your letter of recommendation, please include specific skills and attributes that demonstrate the applicant's leadership ability, academic achievement(s) and how long you have known the applicant.

Should you have any questions, Tausha Hammett, the Kansas City (KS) Alumnae Chapter Scholarship Committee Chairperson, can be reached at: **redhat@dstkcks.org**

X _____

Signature of person providing recommendation

Application Number: _____
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SCHOLARSHIP APPLICATION CHECKLIST

PLEASE NOTE: *The checklist is intended to serve as a reminder and DOES NOT override the instructions within this application packet. Please adhere to all detailed instructions contained within the application packet.*

Be sure to look over your application packet in its entirety to ensure that you have included the following:

_____	Completed and signed application (pg.2)
_____	Written Essay- (Must be typed, double spaced and min. of 150 words) (pg.3)
_____	Community Service Letter of Recommendation addressed to KCK Alumnae Chapter Red Hat/Red Tie, in a sealed envelope on an official letterhead (pg.4)
_____	Scholastic Letter of Recommendation addressed to KCK Alumnae Chapter Red Hat/Red Tie, in a sealed envelope on an official letterhead (pg.5)
_____	Copy of official transcript in a school provided, sealed and stamped envelope

Mail the completed application to the following address:

Delta Sigma Theta Sorority, Inc.,
Kansas City (KS) Alumnae Chapter
Red Hat/Red Tie Scholarship Committee
P.O. Box 12663
Kansas City, Kansas 66112-0663
(Postmarked no later than Thursday, January 30, 2025)

**All application packets will become property of the Red Hat/Red Tie Scholarship Committee and will not be returned.*