



**Marietta-Roswell Alumnae Chapter  
Delta Sigma Theta Sorority, Inc.  
Delta GEMS Application  
Growing & Empowering Myself Successfully**

**Please note that all applicants must reside in our service areas, which are Cobb, North Fulton and Cherokee counties.**

*Return completed application via email to [EdDevelopment@dstmrac.com](mailto:EdDevelopment@dstmrac.com)*

**Part I: To be completed by a Parent/Guardian**

\_\_\_\_\_ My daughter will be a new participant

\_\_\_\_\_ My daughter will be returning

|   |  |
|---|--|
| Parent/Guardian Name:   |  |
| Address:  |  |
| City, State, Zip:   |  |
| Home Phone:   |  |
| Cell/Alternate Phone:   |  |
| Email Address:  |  |
| Is the mother/female guardian a member of Delta Sigma Theta Sorority, Inc.? |  |
| If so, are you currently active?<br>(list chapter)                          |  |
| How did you hear about Delta Academy?                                       |  |

|  |  |
|--|--|
| Child's Name:  |  |
| Address (if different from above):   |  |
| City, State, Zip:  |  |
| Home Phone (if different from above):  |  |
| Cell/Alternate Phone:  |  |
| Email Address:   |  |
| Name of school:  |  |
| Grade (for upcoming school year)<br>– 9 <sup>th</sup> , 10 <sup>th</sup> , 11 <sup>th</sup> , 12 <sup>th</sup> |  |
| Date of Birth:   |  |
| Shirt Size:  |  |

**Part II: To be completed by Child/Student**

**1. What are your plans after graduating from high school?**

\_\_\_\_ College            \_\_\_\_ Vocational School            \_\_\_\_ Technical School  
\_\_\_\_ Work            \_\_\_\_ Undecided            \_\_\_\_ Other

**2. What are your career aspirations?**

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**3. All students must include an essay with their application. The essay should be 500 – 750 words, double-spaced, 12pt Times New Roman font. Your essay must meet these minimum requirements to be considered for the program.**

**TOPIC:** *How will achieving your career aspirations impact your life and the lives of others in your family and/or community?*