



*Indianapolis Alumnae Chapter of Delta Sigma Theta Sorority, Incorporated*

**Dr. Betty Shabazz Delta Academy**

*"Catching the Dreams of Tomorrow ~ Preparing Young Women for the 21st Century"*

**Indianapolis Alumnae Chapter  
Delta Sigma Theta Sorority, Inc.  
A Service Sorority**

March 11, 2010

Dear Parent/Guardian;

"Catching the Dreams of Tomorrow, Preparing Young Women for the 21st Century", the Dr. Betty Shabazz Delta Academy was created out of an urgent sense that bold action was needed to provide resources to young, African American females (ages 11-14) from the perils of academic failure, low self-esteem, and crippled futures. Specifically, we augment their scholarship in math, science, and technology; their leadership through service learning; and their sisterhood, defined as the cultivation and maintenance of positive relationships. A primary goal of the program is to prepare young females for full participation as leaders in the 21st Century.

The women of the Indianapolis Alumnae Chapter of Delta Sigma Theta Sorority, Inc. are now recruiting young middle school African-American girls, between the ages of 11 – 14 (must be in middle school for the 2010-2011 school year and 11 by August 1, 2010), to participate in the Dr. Betty Shabazz Delta Academy. The Dr. Betty Shabazz Delta Academy is one of the sorority's national programs.

August 2010 marks the third year that the Indianapolis Alumnae Chapter of Delta Sigma Theta Sorority, Inc. will sponsor the Dr. Betty Shabazz Delta Academy. The program thrusts for this year remain:

**Computer Literacy ~~ Sisterhood ~~ Academics and Career Choices ~~ Self-Esteem**

Please mark the following dates on your calendar:

- Application deadline date (must be postmarked by this date) April 12, 2010
  - Send applications to: Michelle Taylor  
C/O Dr. Betty Shabazz Delta Academy  
P.O. Box 501577  
Indianapolis, IN 46250
- Interviews (IPS School 106) May 8, 2010
- Kickoff/Parent Meeting (Date, Time, & Place TBA) TBD

Parent/guardian will be responsible for the following:

- A complete and correct student application form
- Student reads the enclosed Delta Sigma Theta Sorority, Inc. history page
- \$25 Nonrefundable Activity Fee (if selected to participate in the Dr. Betty Shabazz Delta Academy)

Please feel free to contact me at 317-946-1188 with questions. We look forward to positively impacting the life of your young student!

Sincerely,

**Michelle L. Taylor**

Michelle L. Taylor  
Chairperson, Dr. Betty Shabazz Delta Academy



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## *History*

Delta Sigma Theta Sorority, Inc. was founded by 22 young women at Howard University in Washington D.C. on January 13, 1913. In 1930 the organization was incorporated for the purposes of providing services and programs to promote human welfare. From the first undergraduate chapter, Alpha Chapter, the sorority has grown to an organization of over 900 chapters with more than 250,000 members nationally and internationally.

Delta Sigma Theta Sorority, Inc. has a national Five Point Program in the following areas:

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

An examination of Delta Sigma Theta's programs through the years reveals a pattern of ongoing activities that relates to one or more of the Five Point Programs stated above. Programs are also developed to address significant contemporary issues that are on the cutting edge. Many of those which have become identified as "Delta" programs are Jabberwock, Financial Fortitude, Project S.E.E., the Distinguished Professor Endowed Chair, Adopt a Black Business, Delta Days at the Nations Capital, and The Dr. Betty Shabazz Delta Academy and Delta GEMS.

Originally chartered in Indianapolis, Indiana on March 14, 1925 as Chi Chapter, the Indianapolis Alumnae Chapter was restructured as a graduate chapter in January 1978. The Indianapolis Alumnae Chapter now has a mailing list of over 600 members and continues to grow and prosper. Some programs the Indianapolis Alumnae Chapter sponsors aside from The Black College Tour are Delta GEMS (a mentoring program for young ladies), Delta Days at the State Capital, Project S.E.E. (Science in Everyday Experiences), UNCF Benefit, scholarships, and volunteering at the Indianapolis Motor Speedway just to name a few.

The Dr. Betty Shabazz Academy is established by Delta Sigma Theta Sorority, Inc. for leadership through service and academic enhancement of young African-American girls between the ages of 11 – 14. The Dr. Betty Shabazz Academy seeks to support and provide resources to assist in the development of young girls in the academic areas of Math, Science, and Technology. We also seek to provide exposure to the arts including music and drama. The primary goal of the Dr. Betty Shabazz Academy is to prepare young girls for full participation as leaders in the 21<sup>st</sup> Century.



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# Membership Application

PLEASE DO NOT DUPLICATE THIS APPLICATION

PLEASE PRINT LEGIBLY WITH BLUE OR BLACK INK OR TYPE

Name \_\_\_\_\_  
Last First Middle

Age \_\_\_\_\_ Birth date (month/day/year) \_\_\_\_\_

Address \_\_\_\_\_  
City State Zip Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Parent/Guardian Name(s) \_\_\_\_\_

Parent E-mail \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

School Attending (Fall of 2010) \_\_\_\_\_ School District \_\_\_\_\_

Circle Present Grade: 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup> 9<sup>th</sup>

What is your favorite academic subject? \_\_\_\_\_

Report Card or Progress Report Submitted? Yes \_\_\_\_\_ No \_\_\_\_\_ If not, why? \_\_\_\_\_

List extra-curricular activities (i.e. athletics, band, clubs, etc.) \_\_\_\_\_

List any honors and awards \_\_\_\_\_

List any special talents you possess \_\_\_\_\_

Describe any community service projects or unique endeavors in which you have been involved \_\_\_\_\_

What do you expect to gain from the Dr. Betty Shabazz Delta Academy? \_\_\_\_\_

What are your future goals? \_\_\_\_\_

List any physical restrictions that you may have \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



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**ACADEMIC TEACHER RECOMMENDATION FORM**

**To the applicant:** Complete the following lines and then give this form to one of your present academic teachers. Please inform your teacher that, upon completion, this recommendation should be returned to you in a *sealed envelope*.

Student's Name \_\_\_\_\_ School Attending: \_\_\_\_\_

**To the teacher:** The above named student has applied for participation in the Dr. Betty Shabazz Delta Academy. Please return this form to the student in a sealed envelope so that it may be submitted with the application packet by **April 12, 2010**. This information will be kept strictly confidential.

Teacher's Name \_\_\_\_\_ Subject: \_\_\_\_\_

Please check the following response for each of the following items:

**BEHAVIOR**

- \_\_\_ Consistently appropriate
- \_\_\_ Usually well behaved
- \_\_\_ Seldom appropriate
- \_\_\_ Inappropriate

**INITIATIVE**

- \_\_\_ Actively creative
- \_\_\_ Self-Reliant
- \_\_\_ Seldom Initiates
- \_\_\_ Merely Conforms

**CONCERN FOR OTHERS**

- \_\_\_ Deeply concerned
- \_\_\_ Somewhat concerned
- \_\_\_ Self-Centered
- \_\_\_ Indifferent

**INTEGRITY**

- \_\_\_ Consistently trustworthy
- \_\_\_ Generally Honest
- \_\_\_ Questionable at times
- \_\_\_ Not at all dependable

**INDUSTRY**

- \_\_\_ Seeks additional work
- \_\_\_ Prepares assigned work regularly
- \_\_\_ Needs occasional prodding
- \_\_\_ Needs constant pressure

**INFLUENCE/LEADERSHIP**

- \_\_\_ Judgment well respected
- \_\_\_ Contributes with important affairs
- \_\_\_ Cooperative with minor affairs
- \_\_\_ Negative

**RESPONSIBILITY**

- \_\_\_ Assumes responsibility well
- \_\_\_ Usually dependable
- \_\_\_ Somewhat dependable
- \_\_\_ Unreliable

**EMOTIONAL STABILITY**

- \_\_\_ Exceptionally stable
- \_\_\_ Well-balanced
- \_\_\_ Excitable or Unresponsive
- \_\_\_ Hyperemotional or Apathetic

Please list this student's strengths \_\_\_\_\_

\_\_\_\_\_

Please list this student's weaknesses \_\_\_\_\_

\_\_\_\_\_

Teacher's estimate of this student's future success, based on the purpose of this application:

\_\_\_ Little success    \_\_\_ May encounter some difficulty    \_\_\_ Average    \_\_\_ Above Average

Specific Recommendation: \_\_\_\_\_ Recommend    \_\_\_\_\_ Not recommended that this student participate

Date \_\_\_\_\_ Teacher Signature \_\_\_\_\_