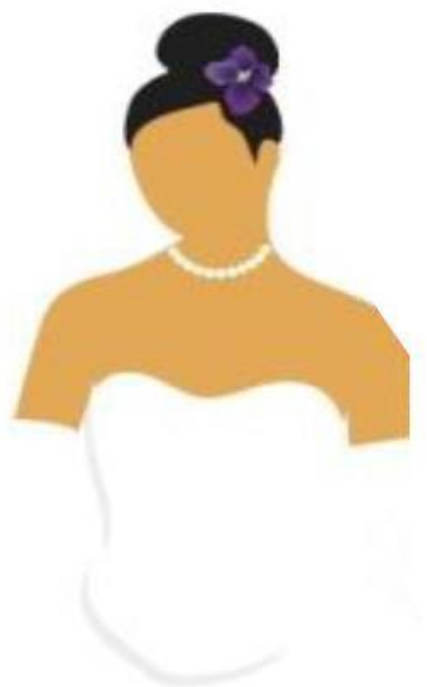


**Delta Sigma Theta Sorority, Inc.  
Cincinnati Alumnae Chapter**

DEBUTANTE  
COTILLION



**2021 – 2022 Application Packet**

## 2021– 2022 COTILLION OVERVIEW

For over 20 years, the Cincinnati Alumnae Chapter (CAC) of Delta Sigma Theta Sorority, Inc. has been formally presenting young high school ladies to society and the Cincinnati community through its annual Debutante Cotillion Program. It's a comprehensive program that runs for approximately five months. The Program's mission is to enhance the personal, professional, and civic development of young girls in the Cincinnati Metro area through workshops, events and rehearsals while cultivating scholarship, achievement, self-confidence, grace, and good citizenship.

CAC's Debutante Cotillion Program is made up of four key components:

- Δ **Scholarship** – The program stresses the importance of scholastic achievement and the value of higher educational excellence through scholarship awards.
- Δ **Service** –The young ladies are taught the importance of reinvesting in the community through individual and collective community service activities.
- Δ **Mentoring** – As an integral component of the program, mentoring allows the Debutantes to network with a dynamic group of professional women committed to sisterhood and improving communities throughout the world.
- Δ **Development** – The workshops and rehearsals are designed to promote personal and professional development and to teach each young lady to become more refined and adept in social settings.

Since 1993, CAC's Debutante Cotillion Program has awarded more than \$250,000 in scholarships to qualifying participants. This year's program will follow in this legacy, using the proceeds raised through ticket sales, advertising journal sales and other donations to continue funding scholarships that help assist with the financial obligation of furthering one's education beyond high school.

### **Eligibility and Selection Requirements**

- Δ Must be a female junior or senior between ages 16 to 18 enrolled in a Greater Cincinnati/NKY Metro area high school during the 2021 – 2022 school year
- Δ Must submit completed application forms and a \$25 **non-refundable application fee (must be a money order or check made payable to Delta Sigma Theta Sorority, Inc.)**
- Δ Must submit a completed and signed recommendation form from a teacher, school administrator, clergy member, community leader or volunteer organization leader in a sealed envelope
- Δ Must submit an official transcript in a sealed envelope with evidence of a minimum 2.5 GPA based on a 4.0 grading scale
- Δ A current photograph (.jpeg or .pdf formats) acceptable via email (to [caccotillion@gmail.com](mailto:caccotillion@gmail.com)) or a hard copy along with the \$25 application fee.
- Δ Please scan and email the application to [caccotillion@gmail.com](mailto:caccotillion@gmail.com).

### **Mail registration fee and supporting documentation to:**

Delta Sigma Theta Sorority Inc. - Cincinnati Alumnae Chapter  
Attn: Cotillion Committee  
P.O. Box 42694  
Cincinnati, OH 45242

**FOR QUESTIONS, PLEASE CONTACT [CACCOTILLION@GMAIL.COM](mailto:CACCOTILLION@GMAIL.COM). THE COMPLETED**

**APPLICATION CAN BE EMAILED BUT THE ACCOMPANYING DOCUMENTS MUST BE MAILED  
AND  
MUST BE RECEIVED NO LATER THAN NOVEMBER 12, 2021 TO BE CONSIDERED.**

***Selection and Notification***

Selected applicants will be mailed/emailed a Letter of Acceptance by Saturday, November 27, 2021

**COTILLION APPLICATION**

**Personal Information**

Applicant's Name \_\_\_\_\_  
*First Middle Last*

Address \_\_\_\_\_  
*Street City, State Zip*

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Date of Birth \_\_\_\_\_ Email \_\_\_\_\_  
*(mm/dd/yyyy) (an active email address is required)*

Applicant lives with:  Mother/ Guardian  Father / Guardian  Both

Mother/ Guardian \_\_\_\_\_ Mother/ Guardian \_\_\_\_\_  
Name Email

Address \_\_\_\_\_  
*(If different from above) Street City, State Zip*

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Father / Guardian \_\_\_\_\_ Father/ Guardian \_\_\_\_\_  
Name Email

Address \_\_\_\_\_  
*(If different from above) Street City, State Zip*

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Do you have any members of Delta Sigma Theta Sorority, Inc. in your immediate network  
(family, close friends, mentors)?  Yes  No

If your answer is "Yes," please give the member's name and relationship to you:

\_\_\_\_\_

**Academic Information**

HS School Name \_\_\_\_\_

Address \_\_\_\_\_  
*Street City, State Zip*

GPA \_\_\_\_ / \_\_\_\_ (e.g. 3.5/4.0 scale)      HS Classification:  Junior  Senior

**Extracurricular/ Community Involvement**

Be sure to include name of activity, grade level of participation, accomplishments and positions held. Please attach additional sheet(s) if necessary.

School-Related Activities:

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Other Extracurricular Activities:

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Church/ Community Service Involvement:

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Honors/ Awards/ Achievements:

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Special Talents and Hobbies:

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**COTILLION PERSONAL STATEMENT**

Please answer the following questions about your personal and career aspirations. Please attach additional sheet(s) if necessary.

1. What field of study and/or career are you interested in pursuing? Please explain.

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2. What personal goals and/ or aspirations have you set for yourself? Please explain.

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3. Describe how your involvement as a Debutante will enhance your personal character?

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4. What ultimate contributions do you wish to make to society?

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5. Identify the one person that has influenced you the most and explain why.

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**COTILLION PARENTAL CONSENT FORM**

Applicant's Name \_\_\_\_\_  
*First Middle Last*

PARENT SECTION: This section is to be completed and signed by a parent/ guardian. The names listed below will appear on all publications and publicity related to the Debutante Candidate.

Mother/Guardian \_\_\_\_\_  
*First Middle Last*

Father/Guardian \_\_\_\_\_  
*First Middle Last*

If the names listed above will not be presenting your **Debutante** Candidate at the Cotillion, please list the names and relationship to the Debutante Candidate of those who will.

Female \_\_\_\_\_ Relationship \_\_\_\_\_

Male \_\_\_\_\_ Relationship \_\_\_\_\_

**Parent/Guardian Statement:** If selected, I give permission for my daughter to participate in the Cincinnati Alumnae Chapter's 2021-2022 Cotillion Program. **I understand that it will be my financial responsibility to provide the fees necessary to cover the cost of participation for my daughter and to meet all deadlines to ensure proper inclusions in Cotillion materials. This includes, but is not limited to, the non-refundable \$25 application fee and non-refundable participation fee (if selected).** Also, I am aware that our inability to meet required fundraising minimums will result in my daughter being omitted from any special financial awards given to those participants who meet the program requirements.

**Parent/Guardian Name:** \_\_\_\_\_  
*(Please Print)*

**Signed:** \_\_\_\_\_ **Date:** \_\_\_/\_\_\_/\_\_\_

### RECOMMENDATION FORM

*(To be completed by a teacher, school administrator, clergy member, community leader or volunteer organization leader)*

Applicant's Name \_\_\_\_\_  
*First Middle Last*

The above applicant has submitted an application to participate in the Cincinnati Alumnae Chapter of Delta Sigma Theta Sorority, Inc. Debutante Cotillion Program. The candidate asks that you serve as a character and/or academic reference. Your answers should be related to the qualifications of the applicant to maintain superior academic standards, strive for exceptional personal achievement, and exemplify high moral and spiritual attitudes.

Please complete and return to applicant in a sealed envelope with your signature across the sealed closure. Thank you for your assistance. Attach additional sheets if necessary.

1. How long have you known the applicant? \_\_\_\_\_

2. Are you related to the applicant?  Yes  No

3. In what capacity do you know the applicant? \_\_\_\_\_

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4. Please give us your appraisal of the applicant in terms of the attributes listed below.

	Poor	Below Average	Above Average	Average	Excellent
Leadership Skills					
Maturity Level					
Cooperativeness					
Respectfulness					
Self-Confidence					
Attitude/Personality					

5. Please explain why you feel this applicant would be an asset to CAC's 2021-2022 Debutante Cotillion Program. Please attach additional sheet(s) if necessary to answer question.

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**Recommender's Name** \_\_\_\_\_ **Title** \_\_\_\_\_

**Signed** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Recommender Signature)

**School Name** \_\_\_\_\_ **City** \_\_\_\_\_

**Email Address** \_\_\_\_\_

### STATEMENT OF QUALIFICATION

I, \_\_\_\_\_, confirm that I meet all the Cotillion participation criteria listed below and understand that I must maintain these standards throughout the 2021 – 2022 Cotillion season.

1. Must be a female Junior or Senior between the ages of 16 and 18.
2. Cumulative grade point average of 2.5 or better based on a 4.0 grading scale (verified by official transcript.) Transcripts should be submitted in a sealed envelope with your school's seal.
3. Demonstrate interest and involvement in public service and community related activities.
4. Demonstrate goals, aspirations, and plans to pursue an education beyond high school.
5. Evidence of good moral character, which includes but not limited to:
  - A. No record of poor discipline at school or in the community
  - B. No criminal, misdemeanor, or court record of any kind
  - C. Must not be a parent
  - D. No indication or public hint of pregnancy

*Note:* If you are currently pregnant or become pregnant during the Cotillion season you will become ineligible and not allowed to continue participating in all remaining Cotillion activities and Cotillion presentation

6. Must not have previous or current employment in places of entertainment including bars, clubs, etc.
7. Must be able to commit to attending all necessary rehearsals and activities that occur throughout the Cotillion Season.
8. Upon acceptance, the potential participant must be willing to abide by further guidelines.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Applicant Signature)

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Parent/Guardian Signature)

### ACKNOWLEDGEMENTS & SIGNATURES

I, \_\_\_\_\_ (*print name*), certify that I have provided truthful and complete information in this application. I authorize the Cincinnati Alumnae Chapter of Delta Sigma Theta Sorority, Inc.'s Cotillion Co-Chairs and/or President and Vice Presidents to verify any information provided in this application.

I understand that falsification of any information in this application will result in my dismissal from the Cotillion program and that any money received from me or on my behalf will NOT be refunded. I further understand that if I voluntarily withdraw from the Cotillion program any money received from me or on my behalf will NOT be refunded.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Applicant Signature)

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Parent/Guardian Signature)